



Health

# 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: AUG 19 PM 12:2

Permit No.: B19002738

Building Address: 4450 RT 97  
 City: BROOKVILLE State: MD Zip Code: 20833  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: SFD  
 Proposed Use: SFD W/PROPANE TANK  
 Estimated Construction Cost: \$ 3000  
 Description of Work: INSTALL 500 GAL UNDERGROUND PROPANE TANK

Occupant/Tenant Name: OWNER  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 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:	<u>Depth</u> <u>Width</u>
Gross area, sq. ft./floor:	1 <sup>st</sup> floor: _____ 2 <sup>nd</sup> floor: _____
Area of construction (sq. ft.):	Basement: _____ <input type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl Space
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: _____
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>
<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: _____
<b>➤ Roadside Tree Project Permit</b>	Footings: _____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof: _____
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: DECATUR LLC  
 Address: 511 ASHTON ROAD  
 City: ASTON State: MD Zip Code: 20861  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Applicant's Name & Mailing Address, (if other than stated herein)**  
 Applicant's Name: MICHELLE CLANCY  
 Address: PO BOX 310  
 City: PERRY HALL State: MD Zip Code: 21128  
 Phone: 443-610-7514 Fax: \_\_\_\_\_  
 Email: MICHELLE@APPLIEDANDAPPROVED.COM

Contractor Company: HJ POIST  
 Contact Person: MICHAEL UNDERWOOD  
 Address: 360 MAIN STREET  
 City: LAUREL State: MD Zip Code: 20707  
 License No.: 60029  
 Phone: 301-725-3232 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

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

Utilities	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Heating System</b>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Grading Permit Number:</b>	
<b>Building Shell Permit Number:</b>	

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  
MICHELLE@APPLIEDANDAPPROVED.COM  
 Email Address  
PERMITS  
 Title/Company

MICHELLE CLANCY  
 Print Name  
8/19/19  
 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>8/14/19</u>	<u>W. Oswald</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	\$ <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	# <u>7238</u>

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



Menu Save Reset Cancel Help

Record Detail \* (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/New/SFD	B17002428	06/20/2017
Description of Work		
SFD/ CUSTOM/ 2-STORY FULL BSMT (PART FINISH BSMT), 11R, 3FB, 1HB, 1FP, 2-CAR GARAGE SIDE LOAD, (4BR), PORCH, ENERGY CODE PRESCRIPTIVE METHOD		

check spelling

Address \* (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
4450	RT 97	--Select--	
Unit Type	Unit #	X Coordinate	Y Coordinate
--Select--		-77.05579	39.24966
City	State	Zip Code	Primary
BROOKVILLE	MD	20833	Yes

Parcel \* (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
885171	14	1.39	178900	178900	0	RURAL
Legal Description						
1.399 A[ 14470 ROUTE 97[ BROOKVILLE						

check spelling

Block	Lot	Census Tract	Council Dist	Supervisor Dist	Map #	DAP Zone	Primary
		605601	5				Yes
Plan Area	State Tax Id	Subdivision Name					
	1404321804						
Section	Area	Tax Map					
Grid	Zoning District	ADC Map					
SDP No.	Final Plan No.	WP File No.					
Record Plat No.	WS Contract No.	FDP No.					
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
		<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner (This section is not required.)

Search Reset Clear

Name *	DECATUR, LLC	
Address Line 1	511 ASHTON ROAD	
Address Line 2		
Address Line 3		
Mail City	Mail State	Mail Zip Code
ASHTON	MD	20861

Phone	Primary
301-370-1188	Yes
E-mail	
Cell Number	Fax Number

Professionals (This section is not required.)

Search    Reset    Clear

License # *	Business Name		
4635	DECATUR, LLC		
License Type *	First Name	Middle Name	Last Name
Home Bldr	JIMMY		PEREIRA
Primary	Address Line 1		
Yes	511 ASHTON ROAD		
	Address Line 2		
City	State	ZIP Code	
ASHTON	MD	20861	
Phone 1	Phone 2	Fax	
301-370-1188		410-489-0550	
E-mail			
GPCARPENTRY1@GMAIL.COM			

Applicant (This section is not required.)

Search    As Owner    As Lic. Prof    As Contact

Type *	First Name	MI	Last Name
Applicant	JIM		KERWIN
Relationship	Full Name		
Applicant	JIM KERWIN		
Primary	Organization Name		
No	DECATUR BUILDING SERVICES		
	Street Address		
	P.O. BOX 552		
	Address Line 2		
City	State	Zip Code	
WOODBINE	MD	21797	
Phone	Cell	Fax	
443-309-7792	410-489-6500		
E-mail *			
JIM@DECATURBUILDINGSERVICES.COM			

Contact (This section is not required.)

Search    As Owner    As Lic. Prof    As Contact

Type	First Name	MI	Last Name
Contact	JIM		KERWIN
Relationship	Full Name		
Agent for Applicant	JIM KERWIN		
Primary	Organization Name		
Yes	DECATUR BUILDING SERVICES		
	Street Address		
	P.O. BOX 552		
	Address Line 2		
City	State	Zip Code	
WOODBINE	MD	21797	
Phone	Cell	Fax	
443-309-7792	410-489-6500		
E-mail			
JIM@DECATURBUILDINGSERVICES.COM			

Addtl Info

Est Construction Cost *	Housing Units *	Number of Buildings *	Public Owned
240000	1	1	No
Construction Type			

101 - Single Family Houses Detached

BUILDING INFORMATION

BUILDING INFORMATION

Capital Project-No Fee \*  Yes  No    Capital Project Number [ ]    Fee Exempt \*  Yes  No    Guaranty Fund Required \*  Yes  No    Roadside Tree Project Permit  Yes  No

Roadside Tree Project Permit # [ ]    Condominium  Yes  No    Existing Use     1st Floor Width  FT    1st Floor Depth  FT

2nd Floor Width  FT    2nd Floor Depth  FT    Basement Width  FT    Basement Depth  FT    Height  FT    Total Square Footage \*  SQFT    Occupiable Square Footage \*  SQFT    Bedrooms \*

Full Baths     Half Baths     Foundation     Basement     Other Structure     Building Construction Type

W&S Fees Paid \*  Yes  No    Water Supply \*     Sewage Disposal \*     Utilities \*     Heating System \*     Sprinkler System \*

No of Fireplaces     Type of Fireplace     Entrance Permit Required  Yes  No    Road Frontage     Location Survey Approval Date [ ]    Expiration Date

U&O Issued On [ ]    U & O Comments [ ]

[check spelling](#)

GRADING INFORMATION

Grading Permit No     Grading Certification Required  Yes  No    Grading Certification Received in DILP On [ ]    Grading Certification Received in CID On [ ]

Grading Certification Comments [ ]    Seasonal Surety Comments [ ]

[check spelling](#)    [check spelling](#)

Seasonal Grading Surety Depositor [ ]    Driveway Apron Surety Depositor [ ]    Stormwater Surety Depositor [ ]

GREEN NEIGHBORHOOD INFORMATION

Check List Points Goal [ ]    Check List Points Achieved [ ]    Date of Certification [ ]

PAYMENT INFORMATION

Check 1     Payee 1     Check 2 [ ]    Payee 2 [ ]    SAP Doc No [ ]    SAP Entered [ ]

PRIVATE ON LOT SWM FACILITIES

Green Roofs A1  Yes  No    Permeable Pavements A2  Yes  No    Reinforced Turf A3  Yes  No

Disconnection of Rooftop Runoff N1     Disconnection of Non Rooftop Runoff N2  Yes  No    Sheetflow to Conservation Areas N3  Yes  No

Rainwater Harvesting M1 [ ]    Submerged Gravel Wetlands M2 [ ]    Landscape Infiltration M3 [ ]    Infiltration Berms M4 [ ]

Dry Wells M5 [ ]    Micro Bioretention M6     Rain Gardens M7 [ ]    Swales M8 [ ]    Enhanced Filters M9 [ ]

Related Records

1


Permit Number	Record Type Alias	Status	Number	Street Name	Opened Date	Description
G17000228	Residential Grading Permit	Issued	4450	RT 97	07/18/2017	4450 ROUTE 97/ GRADING & SEDIMENT C
B17002428	Residential New Single Family Dwelling Permit	Review In Process	4450	RT 97	06/20/2017	SFD/ CUSTOM/ 2-STORY FULL BSMT (PAR

1

Submit Cancel

Health Department

DPZ, Health and SHA B1 Permit Review  
HOWARD COUNTY, MD



- My Navigation**
- CAP Detail/Summary
  - Application Comments
  - Licensed Professionals
  - Workflow
  - Workflow History
  - App Spec Info
  - Contacts
  - Hierarchy
  - CAP Conditions
  - Assess/Invoice Fees
  - Payment Summary
  - Attachments
  - Assign Tasks
  - Address Info
  - Parcel Info
  - Sets
  - Inspections
  - Email Notification

- Reports**
- ▶ My Reports
  - ▶ Accounting
  - ▶ Enforcement
  - ▶ IE Rental Housing
  - ▶ Inspections
  - ▶ Licenses
  - ▶ Permits
  - ▶ Permitting Reports
  - ▶ Plans Review
  - ▶ Reconciliation
  - ▶ Rental License
  - ▶ Statistics

Menu | Refine Search | GIS | Help | Data Filter: Filter TMP's | My Filters --Select-- | Module: Building

Permit #	Status	Record Type Alias	Street #	Street Name	Type	Unit Type	Unit #	City	Description
<input type="checkbox"/> B17002428	Review In Process	Residential New Single Family Dwelling Permit	4450	RT 97				BROOKEVILLE	SFD/ CUSTOM/ 2-STORY FULL BSMT (PA...

**Building Permit ID: B17002428**

Cancel | Help

Go To | Workflow History (14)

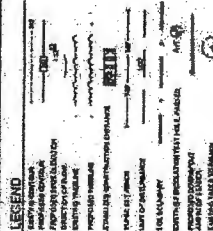
Task	Due Date	Assigned Date
Health Dept	07/02/2017	06/27/2017
Assigned to Department	Assigned to	Status
Health Department Tech		Approved
Action by Department	Action By	Status Date
Health Department Tech	Health Department	07/26/2018
Start Time	End Time	Hours Spent
		0.0
Billable	Overtime	Comments
No	No	RSF
Time Tracking Start Date	Est. Completion Date	In Possession Time (hrs)
06/27/2017 08:39 AM	07/02/2017 08:39 AM	4579.03
Display E-mail Address in ACA	<input checked="" type="checkbox"/> Display Comment in ACA	Comment Display in ACA
No		<input checked="" type="checkbox"/> All ACA Users
		<input checked="" type="checkbox"/> Record Creator
		<input checked="" type="checkbox"/> Licensed Professional
		<input checked="" type="checkbox"/> Contact
		<input checked="" type="checkbox"/> Owner
Estimated Hours	Action	Workflow Calendar
0.0	Updated	Workflow Blockout

**My Tasks**

▶ My Task Searching

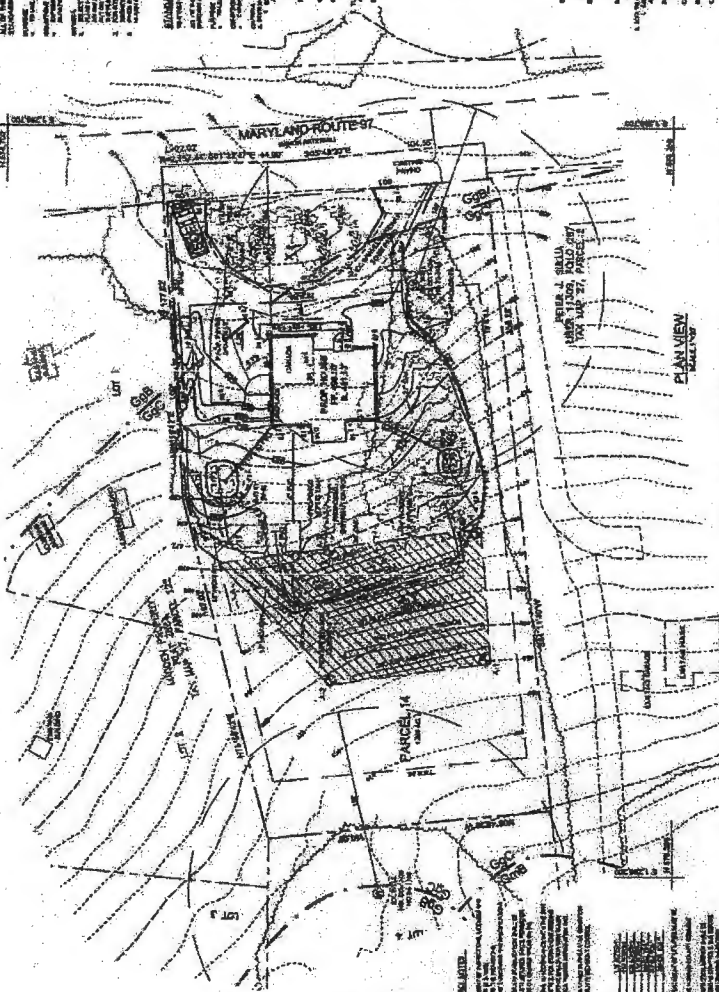
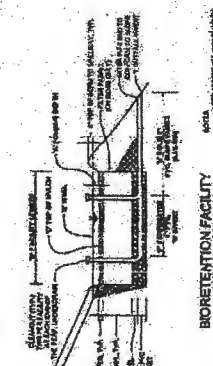
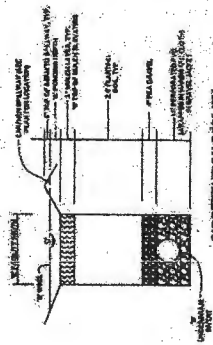
Menu | Assign | Help | My Filters --Select--

Workflow Tasks (0) | Document Review Tasks (0)



**BIORETENTION ELEVATIONS AND DIMENSIONS**

DESCRIPTION	ELEVATION	DIMENSIONS
BIORETENTION	1.0	10' x 10'
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**SITE ANALYSIS DATA CHART**

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**FORESTED WATERS MANAGEMENT PRACTICES**

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**SOIL LEGEND**

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**GENERAL NOTES**

1. ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED.
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**FOREST CONSERVATION WORKSHEET**

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**OWNER**

ADCOCK & ASSOCIATES, I.L.C.

4450 ROUTE 87

PARCEL 14

**ENVIRONMENTAL CONCEPT PLAN**

4450 ROUTE 87

PARCEL 14

ADCOCK & ASSOCIATES, I.L.C.

4450 ROUTE 87

PARCEL 14

**MATERIALS SPECIFICATIONS FOR MICRO-BIORETENTION FACILITIES**

NO.	DESCRIPTION	DATE
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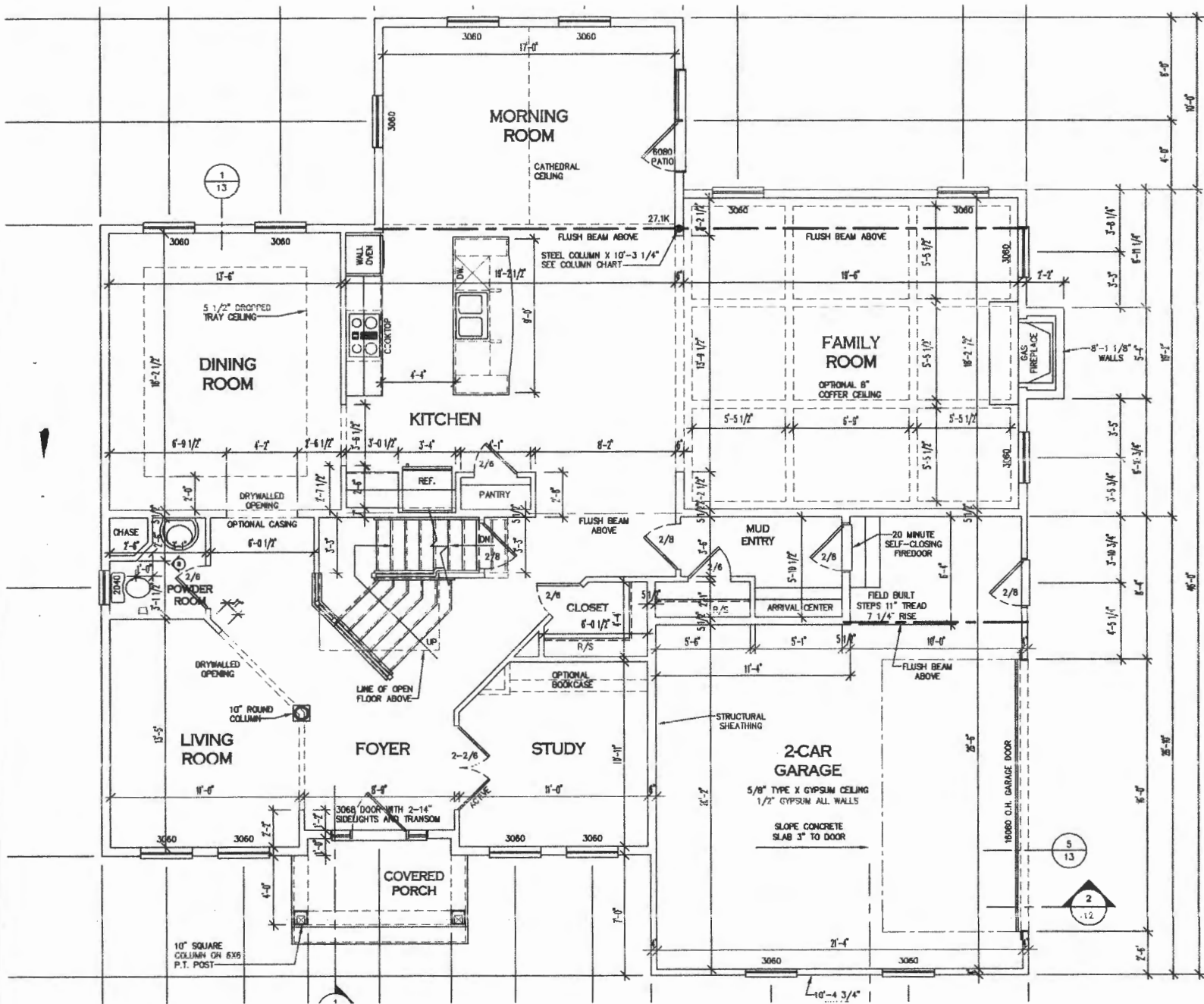
**APPROVED**

6/12/17

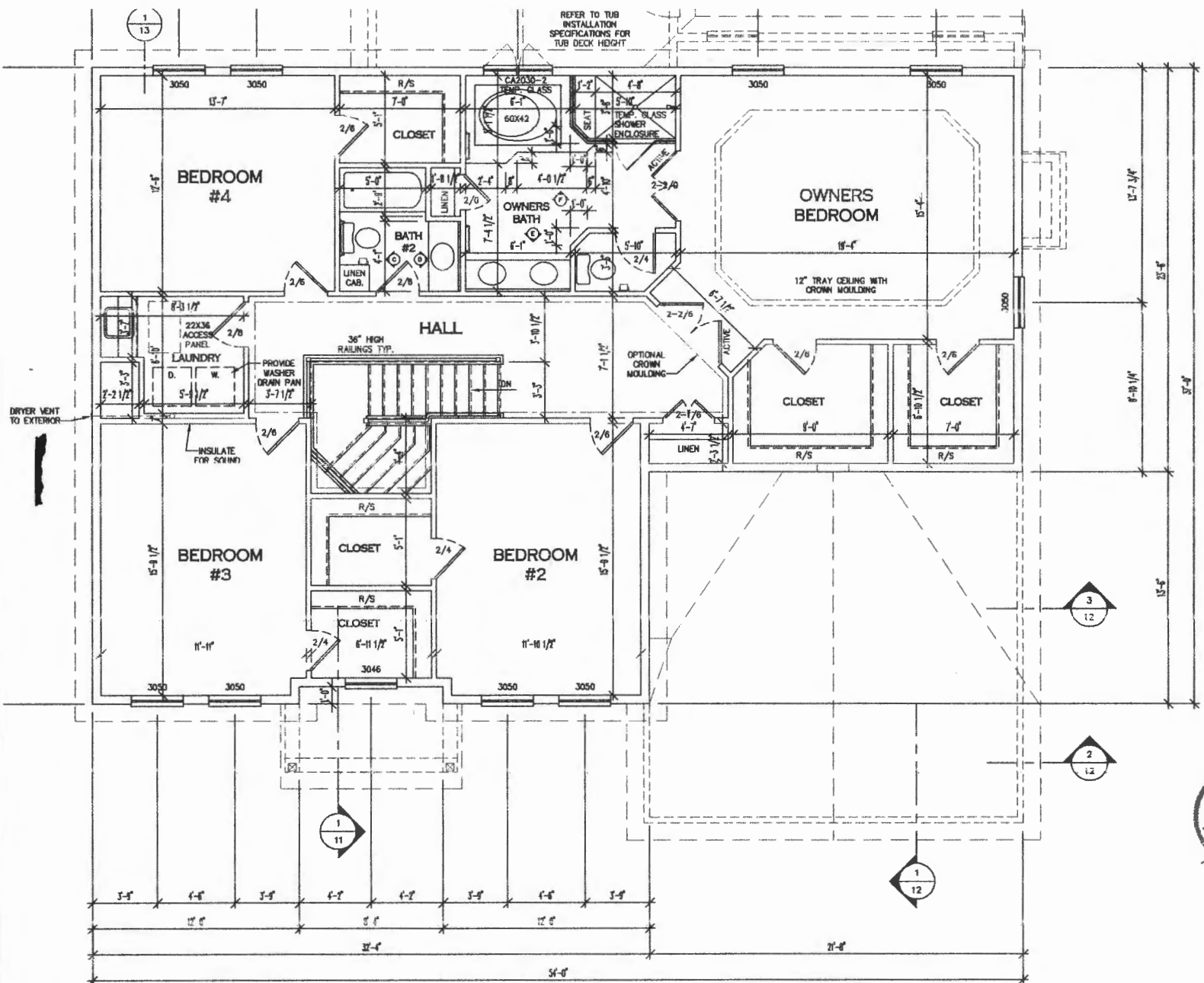
**SOIL LEGEND**

NO.	DESCRIPTION	DATE
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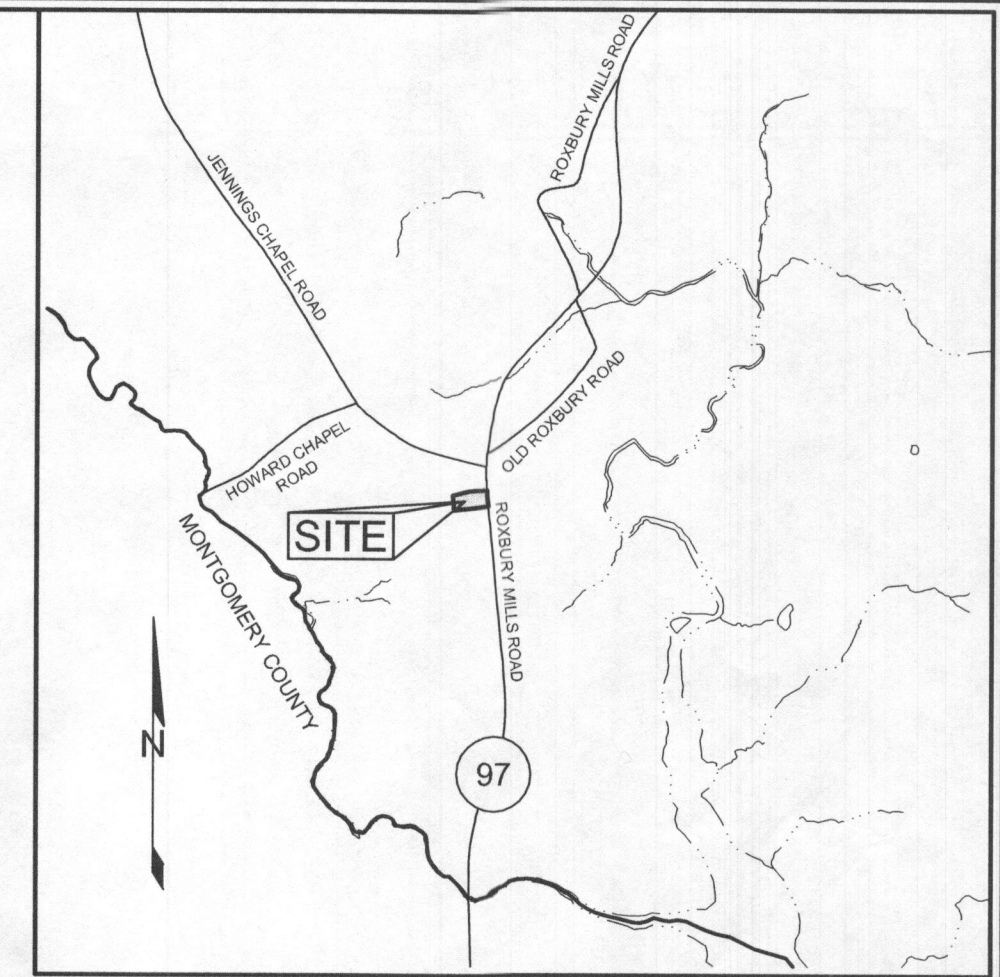
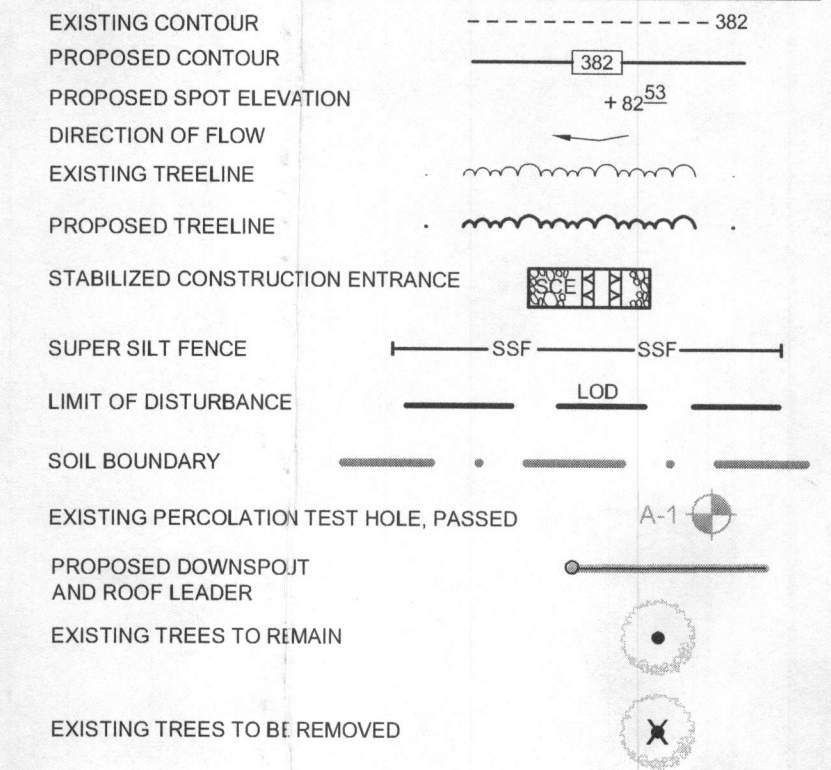
Approved B7002428  
 R/E 7/26/2018  
 Total 4 Bedrooms



Appoval B17002428  
 R14 7/26/2018



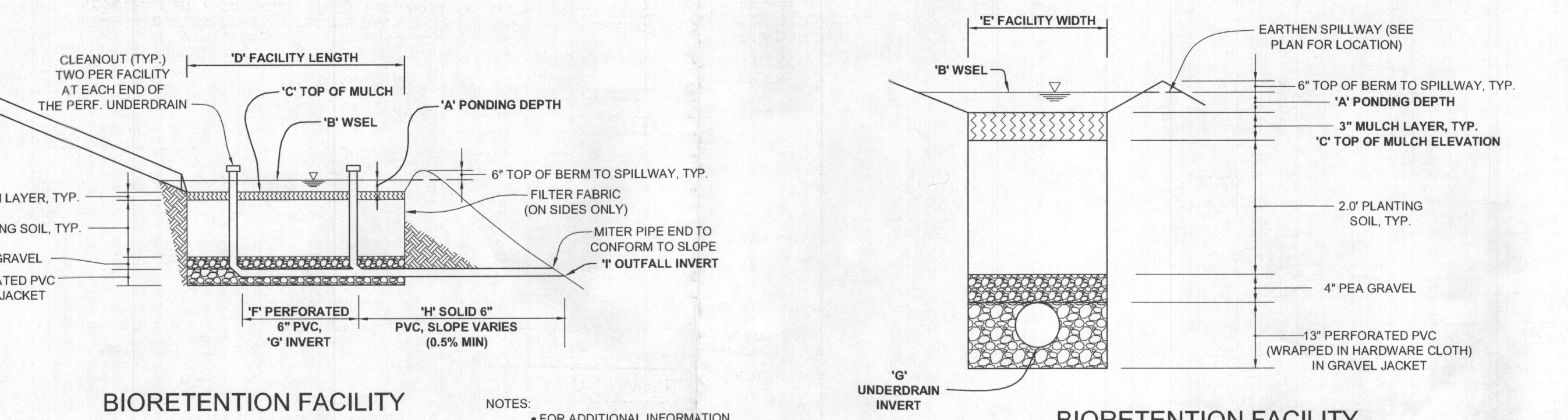
**LEGEND**



ADC MAP 4832-B1  
**VICINITY MAP**  
SCALE: 1"=2000'

**BIORETENTION ELEVATIONS AND DIMENSIONS**

DESCRIPTION	BIO 1	BIO 2
'A' PONDING DEPTH	1.0'	1.0'
'B' WSEL	478.20	476.20
'C' TOP OF MULCH	477.20	475.20
'D' FACILITY LENGTH	14.7'	10.5'
'E' FACILITY WIDTH	11.6'	7.5'
'F' PERF. UNDERDRAIN DIMENSION	9.7'	5.7'
'G' UNDERDRAIN INVERT	474.12	472.12
'H' SOLID UNDERDRAIN DIMENSION	20.2'	26.0'
'I' OUTFALL INVERT	464.0'	471.0'



**BIORETENTION FACILITY TYPICAL PROFILE**  
NOT TO SCALE

**BIORETENTION FACILITY TYPICAL SECTION**  
NOT TO SCALE

- NOTES:**
- FOR ADDITIONAL INFORMATION, SEE THE 2000 MARYLAND STORMWATER DESIGN MANUAL, VOLUMES I AND II.
  - SEE CHART, THIS SHEET, FOR ELEVATIONS AND DISTANCES.
  - FILTER FABRIC IS TO BE USED ON THE SIDES OF THE FACILITY.
  - BIORETENTION TO BE WRAPPED IN AN IMPERMEABLE LINER.

NOTE: FILTER FABRIC IS TO BE USED ON THE SIDES OF THE FACILITY, AND WRAPPED IN AN IMPERMEABLE LINER.

**STANDARDS AND SPECIFICATIONS FOR TEMPORARY STABILIZATION**

TO STABILIZE DISTURBED SOILS WITH VEGETATION FOR UP TO 6 MONTHS.

ALL OF THE TABLES AND DETAILS LISTED BELOW CAN BE FOUND IN THE 2011 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.

**PURPOSE:**

- TO USE FAST GROWING VEGETATION THAT PROVIDES COVER ON DISTURBED SOILS.

**CRITERIA:**

- SELECT ONE OR MORE OF THE SPECIES OR SEED MIXTURES LISTED IN TABLE B.1 FOR THE APPROPRIATE PLANT HARDNESS ZONE (FROM FIGURE B.3) AND ENTER THEM IN THE TEMPORARY SEEDING SUMMARY BELOW ALONG WITH APPLICATION RATES, SEEDING DATES AND SEEDING DEPTHS. IF THIS SUMMARY IS NOT PUT ON THE PLAN AND COMPLETED, THEN TABLE B.1 PLUS FERTILIZER AND LIME RATES MUST BE PUT ON THE PLAN.
- FOR SITES HAVING SOIL TESTS PERFORMED, USE AND SHOW THE RECOMMENDED RATES BY THE TESTING AGENCY. SOIL TESTS ARE NOT REQUIRED FOR TEMPORARY SEEDING.
- WHEN STABILIZATION IS REQUIRED OUTSIDE OF A SEEDING SEASON, APPLY SEED AND MULCH OR STRAW MULCH ALONE AS PRESCRIBED IN SECTION B-4-3-A.1.B AND MAINTAIN UNTIL THE NEXT SEEDING SEASON.

**CONDITIONS WHERE PRACTICE APPLIES:**

- EXPOSED SOILS WHERE GROUND COVER IS NEEDED FOR A PERIOD OF 6 MONTHS OR LESS. FOR LONGER DURATION OF TIME, PERMANENT STABILIZATION PRACTICES ARE REQUIRED.

**CRITERIA:**

- SELECT ONE OR MORE OF THE SPECIES OR SEED MIXTURES LISTED IN TABLE B.1 FOR THE APPROPRIATE PLANT HARDNESS ZONE (FROM FIGURE B.3) AND ENTER THEM IN THE TEMPORARY SEEDING SUMMARY BELOW ALONG WITH APPLICATION RATES, SEEDING DATES AND SEEDING DEPTHS. IF THIS SUMMARY IS NOT PUT ON THE PLAN AND COMPLETED, THEN TABLE B.1 PLUS FERTILIZER AND LIME RATES MUST BE PUT ON THE PLAN.
- FOR SITES HAVING SOIL TESTS PERFORMED, USE AND SHOW THE RECOMMENDED RATES BY THE TESTING AGENCY. SOIL TESTS ARE NOT REQUIRED FOR TEMPORARY SEEDING.
- WHEN STABILIZATION IS REQUIRED OUTSIDE OF A SEEDING SEASON, APPLY SEED AND MULCH OR STRAW MULCH ALONE AS PRESCRIBED IN SECTION B-4-3-A.1.B AND MAINTAIN UNTIL THE NEXT SEEDING SEASON.

**STANDARDS AND SPECIFICATIONS FOR PERMANENT STABILIZATION**

TO STABILIZE DISTURBED SOILS WITH PERMANENT VEGETATION.

ALL OF THE TABLES AND DETAILS LISTED BELOW CAN BE FOUND IN THE 2011 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.

**PURPOSE:**

- TO USE LONG-LIVED PERENNIAL GRASSES AND LEGUMES TO ESTABLISH PERMANENT GROUND COVER ON DISTURBED SOILS.

**CRITERIA:**

- SELECT ONE OR MORE OF THE SPECIES OR MIXTURES LISTED IN TABLE B.3 FOR THE APPROPRIATE PLANT HARDNESS ZONE (FROM FIGURE B.3) AND BASED ON THE SITE CONDITION OR PURPOSE FOUND ON TABLE B.2. ENTER SELECTED MIXTURE(S), APPLICATION RATES, AND SEEDING DATES IN THE PERMANENT SEEDING SUMMARY. THE SUMMARY IS TO BE PLACED ON THE PLAN.
- ADDITIONAL PLANTING SPECIFICATIONS FOR EXCEPTIONAL SITES SUCH AS SHORELINES, STREAM BANKS, OR DUNES OR FOR SPECIAL PURPOSES SUCH AS WILDLIFE OR AESTHETIC TREATMENT MAY BE FOUND IN USDA-NRCS TECHNICAL FIELD OFFICE GUIDE, SECTION 342 - CRITICAL AREA PLANTING.
- FOR SITES HAVING DISTURBED AREA OVER 5 ACRES, USE AND SHOW THE RATES RECOMMENDED BY THE SOIL TESTING AGENCY.
- FOR AREAS RECEIVING LOW MAINTENANCE, APPLY A LIME FORM FERTILIZER (46-0-4) AT 3/4 POUNDS PER 1000 SQUARE FEET (150 POUNDS PER ACRE) AT THE TIME OF SEEDING IN ADDITION TO THE SOIL AMENDMENTS SHOWN IN THE PERMANENT SEEDING SUMMARY.

**CONDITIONS WHERE PRACTICE APPLIES:**

- EXPOSED SOILS WHERE GROUND COVER IS NEEDED FOR 6 MONTHS OR MORE.

**SITE ANALYSIS DATA CHART**

ENVIRONMENTAL AREA	SIZE OR USE
TOTAL PROJECT AREA	1.39 ACRES
ROAD DEDICATION	0.00 ACRES
PROPOSED SITE USES	RESIDENTIAL SFD
OPEN SPACE REQUIRED	0.00 ACRES
WETLANDS	0.00 ACRES
WETLAND BUFFERS	0.00 ACRES
FLOODPLAIN BUFFERS	0.00 ACRES
EXISTING FOREST	0.79 ACRES
MODERATE SLOPES	0.00 ACRES
STEEP SLOPES	0.00 ACRES
IMPERVIOUS AREA	0.12 ACRES
LIMIT OF DISTURBANCE	0.56 ACRES
HIGHLY ERODIBLE SOILS	1.39 ACRES ± (1)

NOTE: (1) HIGHLY ERODIBLE SOILS ARE THOSE SOILS WITH A SLOPE GREATER THAN 15 PERCENT OR THOSE SOILS WITH A SOIL ERODIBILITY FACTOR 'K' GREATER THAN 0.35 AND WITH A SLOPE GREATER THAN 5 PERCENT.

**HOWARD SOIL CONSERVATION DISTRICT STANDARD SEDIMENT CONTROL NOTES**

- A MINIMUM OF 48 HOURS NOTICE MUST BE GIVEN TO THE HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS, SEDIMENT CONTROL DIVISION PRIOR TO THE START OF ANY CONSTRUCTION (313-1855).
- ALL VEGETATIVE AND STRUCTURAL PRACTICES ARE TO BE INSTALLED ACCORDING TO THE PROVISIONS OF THIS PLAN AND ARE TO BE IN CONFORMANCE WITH THE MOST CURRENT MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL AND REVISIONS THERE TO.
- FOLLOWING INITIAL SOIL DISTURBANCE OR REDISTURBANCE, PERMANENT OR TEMPORARY STABILIZATION SHALL BE COMPLETED WITHIN A 3 CALENDAR DAYS FOR ALL PERIMETER SEDIMENT CONTROL STRUCTURES, DIKES, PERIMETER SLOPES AND ALL SLOPES GREATER THAN 3:1, 87 DAYS AS TO ALL OTHER DISTURBED OR GRADED AREAS ON THE PROJECT SITE.
- ALL DISTURBED AREAS MUST BE STABILIZED WITHIN THE TIME PERIOD SPECIFIED ABOVE IN ACCORDANCE WITH THE 2011 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL FOR PERMANENT SEEDING (SEC. B-4-6), TEMPORARY SEEDING (SEC. B-4-4) AND MULCHING (SEC. B-4-3). TEMPORARY STABILIZATION WITH MULCH ALONE CAN ONLY BE DONE WHEN RECOMMENDED SEEDING DATES DO NOT ALLOW FOR PROPER GERMINATION AND ESTABLISHMENT OF GRASSES.
- ALL SEDIMENT CONTROL STRUCTURES ARE TO REMAIN IN PLACE AND ARE TO BE MAINTAINED IN OPERATIVE CONDITION UNTIL PERMITS FOR THEIR REMOVAL HAS BEEN OBTAINED FROM THE HOWARD COUNTY SEDIMENT CONTROL INSPECTOR.
- SITE ANALYSIS:**  
TOTAL AREA OF SITE: 1.39 ACRES ±  
AREA DISTURBED: 0.88 ACRES ±  
AREA TO BE ROOFED OR PAVED: 0.00 ACRES ±  
AREA TO BE VEGETATIVELY STABILIZED: 0.51 ACRES ±  
TOTAL CUT: 360 CU YDS ±  
TOTAL FILL: 110 CU YDS ±  
OFFSITE WASTEWATER BORROW ARE LOCATION: 250 CU YDS ±
- ANY SEDIMENT CONTROL PRACTICE THAT IS DISTURBED BY GRADING ACTIVITY FOR PLACEMENT OF UTILITIES MUST BE REPAIRED ON THE SAME DAY OF DISTURBANCE.
- ADDITIONAL SEDIMENT CONTROL MUST BE PROVIDED, IF DEEMED NECESSARY BY THE HOWARD COUNTY SEDIMENT CONTROL INSPECTOR.
- ON ALL SITES WITH DISTURBED AREAS IN EXCESS OF 2 ACRES, APPROVAL OF THE INSPECTION AGENCY SHALL BE REQUESTED UPON COMPLETION OF INSTALLATION OF PERIMETER EROSION AND SEDIMENT CONTROLS, BUT BEFORE PROCEEDING WITH ANY OTHER EARTH DISTURBANCE OR GRADING. OTHER BUILDING OR GRADING INSPECTION APPROVALS MAY NOT BE AUTHORIZED UNTIL THIS INITIAL APPROVAL BY THE INSPECTION AGENCY IS MADE.
- TRENCHES FOR THE CONSTRUCTION OF UTILITIES IS LIMITED TO THREE PIPE LENGTHS OR THAT WHICH SHALL BE BACK-FILLED AND STABILIZED BY THE END OF EACH WORKDAY, WHICHEVER IS SHORTER.
- ANY CHANGES OR REVISIONS TO THE SEQUENCE OF CONSTRUCTION MUST BE REVIEWED AND APPROVED BY THE PLAN APPROVAL AUTHORITY PRIOR TO PROCEEDING WITH CONSTRUCTION.
- A PROJECT IS TO BE SEQUENCED SO THAT GRADING ACTIVITIES BEGIN ON ONE GRADING UNIT (MINIMUM AREA OF 20 AC. PER GRADING UNIT) AT A TIME. WORK MAY PROCEED TO A SUBSEQUENT GRADING UNIT WHEN AT LEAST 50 PERCENT OF THE DISTURBED AREA IN THE PRECEDING GRADING UNIT HAS BEEN STABILIZED AND APPROVED BY THE ENFORCEMENT AUTHORITY, UNLESS OTHERWISE SPECIFIED AND APPROVED BY THE APPROVAL AUTHORITY. NO MORE THAN 30 ACRES COMPLETELY MAY BE DISTURBED AT A GIVEN TIME.

\* EARTHWORK QUANTITIES ARE SOLELY FOR THE PURPOSE OF CALCULATING FEES. CONTRACTOR TO VERIFY ALL QUANTITIES PRIOR TO THE START OF CONSTRUCTION.  
\*\* TO BE DETERMINED BY CONTRACTOR, WITH PRE-APPROVAL OF THE SEDIMENT CONTROL INSPECTOR WITH AN APPROVED AND ACTIVE GRADING PERMIT.

**SOIL LEGEND**

SYMBOL	GROUP
GgB	MANOR LOAM, 8 TO 15 PERCENT SLOPES
GgC	GLENNVILLE-BAILE SILT LOAMS, 0 TO 8 PERCENT SLOPES

- NOTES:**
- SOIL INFORMATION HAS BEEN TAKEN FROM THE UNITED STATES DEPARTMENT OF AGRICULTURE, NATIONAL RESOURCES CONSERVATION SERVICE, WEB SOIL SURVEY.
  - HIGHLY ERODIBLE SOILS ARE THOSE SOILS WITH A SLOPE GREATER THAN 15 PERCENT OR THOSE SOILS WITH A SOIL ERODIBILITY FACTOR 'K' GREATER THAN 0.35 AND WITH A SLOPE GREATER THAN 5 PERCENT.



**PLAN VIEW**  
SCALE: 1"=30'

**MATERIALS SPECIFICATIONS FOR MICRO-BIORETENTION FACILITIES**

MATERIAL	SPECIFICATION	SIZE	NOTES
PLANTINGS	SEE PLANT LIST THIS SHEET	N/A	PLANTINGS ARE SITE-SPECIFIC. SEE PLANT LIST THIS SHEET.
PLANTING SOIL (2'-4" DEEP)	LOAMY SAND (60% - 65%) & COMPOST (35% - 40%) OR SANDY LOAM (30%), COARSE SAND (30%) & COMPOST (40%)	N/A	USDA SOIL TYPES LOAMY SAND OR SANDY LOAM; CLAY CONTENT < 5%
ORGANIC CONTENT	MIN. 10% BY DRY WEIGHT (ASTM-D-2974)		
MULCH	SHREDDED HARDWOOD		AGED 6 MONTHS, MINIMUM NO. PINE OR WOOD CHIPS
PEA GRAVEL DIAPHRAGM AND CURTAIN DRAIN, IF REQUIRED	ASTM-D-448	PEA GRAVEL: NO. 8 OR NO. 9 (1/8" TO 3/8")	
GEOTEXTILE	N/A	STONE: 2" TO 5"	PE TYPE 1 NONWOVEN
UNDERDRAIN GRAVEL	AASHTO M-43	NO. 57 OR NO. 6 AGGREGATE (3/8" TO 3/4")	
UNDERDRAIN PIPING	F.758, TYPE PS 28 OR AASHTO M-278	4" TO 6" RIGID SCHEDULE 40 PVC OR SCDULS	SLOTTED OR PERFORATED PIPE, 3/8" PERF. @ 6" ON CENTER, 4 HOLES PER ROW, MINIMUM OF 3" OF GRAVEL OVER PIPES; NOT NECESSARY UNDERNEATH PIPES; PERFORATED PIPE SHALL BE WRAPPED WITH 1/4" GALVANIZED HARDWARE CLOTH.

**STANDARD STABILIZATION NOTE**

FOLLOWING INITIAL SOIL DISTURBANCE OR REDISTURBANCE, PERMANENT OR TEMPORARY STABILIZATION MUST BE COMPLETED WITHIN:

- THREE (3) CALENDAR DAYS AS TO THE SURFACE OF ALL PERIMETER DIKES, SWALES, DITCHES, PERIMETER SLOPES AND ALL SLOPES STEEPER THAN 3 HORIZONTAL TO 1 VERTICAL (3:1).
- SEVEN (7) CALENDAR DAYS AS TO ALL OTHER UNDISTURBED OR GRADED AREAS ON THE PROJECT SITE NOT UNDER ACTIVE GRADING.

DURING GRADING AND AFTER EACH RAINFALL, CONTRACTOR WILL INSPECT AND PROVIDE NECESSARY MAINTENANCE TO THE SEDIMENT CONTROL MEASURES ON THIS PLAN.

**FOREST CONSERVATION WORKSHEET**

NET TRACT AREA		
A	TOTAL TRACT AREA	1.39 AC
B	DEDUCTIONS (100 YR FLOODPLAIN)	0 AC
C	NET TRACT AREA	0.56 AC

LAND USE CATEGORY					
ARA	MDR	IDA	HDR	MPD	CIA
0	1	0	0	0	0

EXISTING FOREST COVER		
D	REFORESTATION THRESHOLD (NET TRACT AREA x 25%)	0.73 AC
E	EXISTING FOREST COVER WITHIN THE NET TRACT AREA	0.79 AC
F	AREA OF FOREST ABOVE REFORESTATION THRESHOLD	0.44 AC

BREAK EVEN POINT		
G	BREAK EVEN POINT	0.15 AC

PROPOSED FOREST CLEARING		
H	TOTAL AREA OF FOREST TO BE CLEARED	0.21 AC
I	TOTAL AREA OF FOREST TO BE RETAINED	0.56 AC

PLANTING REQUIREMENTS		
J	REFORESTATION FOR CLEARING ABOVE THE CONSERVATION THRESHOLD	0.05 AC
K	REFORESTATION FOR CLEARING BELOW THE CONSERVATION THRESHOLD	0.00 AC
L	CREDIT FOR RETENTION ABOVE THE CONSERVATION THRESHOLD	0.23 AC
M	TOTAL REFORESTATION REQUIRED	0.00 AC
N	TOTAL AFFORESTATION REQUIRED	0.00 AC

**OWNER**

DECATUR LLC,  
511 ASHTON ROAD  
ASHTON, MD, 20861  
443.309.7792

**PLOT PLAN**

4450 ROUTE 97  
PARCEL 14

TAX MAP 27 GRID 1  
4TH ELECTION DISTRICT

HOWARD COUNTY, MARYLAND

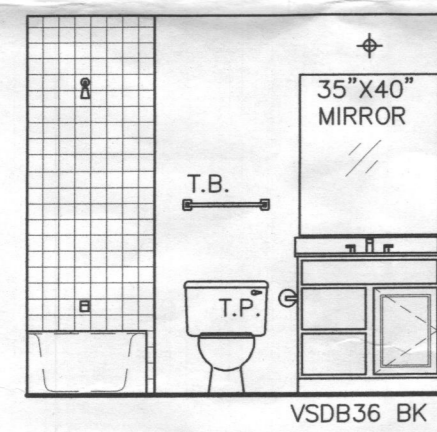


**Adcock & Associates · LLC**  
Engineers · Surveyors · Planners  
3300 North Ridge Road, Suite 160  
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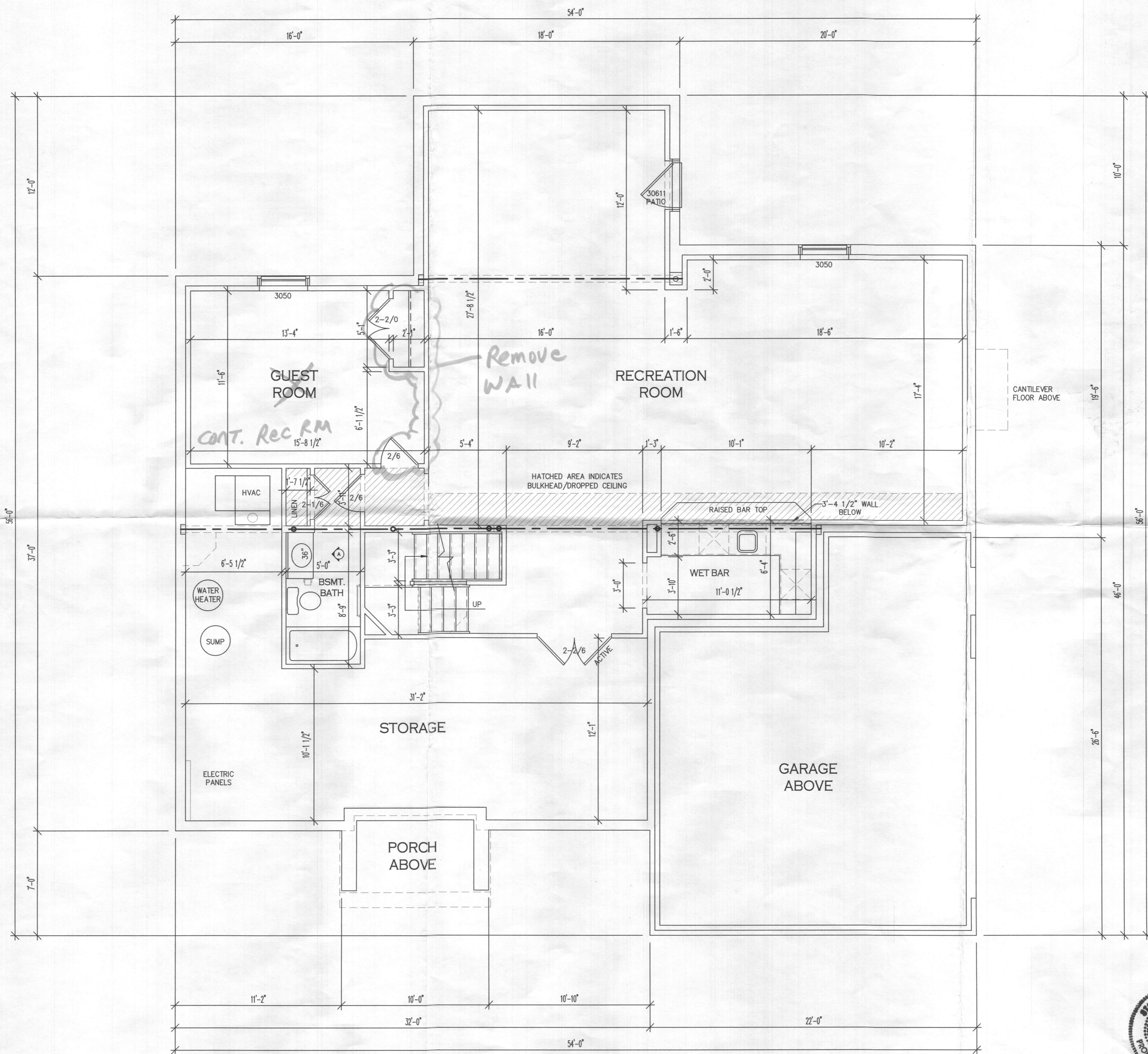
DESIGN BY: JT/DR  
DRAWN BY: JT  
CHECKED BY: DR/MA  
SCALE: AS SHOWN  
DATE: JULY 2, 2018  
PROJECT #: 16-068  
SHEET #: 1 of 2

PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A LICENSED PROFESSIONAL LAND SURVEYOR, UNDER THE LAWS OF THE STATE OF MARYLAND, REG. NO. 21257, EXPIRATION DATE: 06-19-2019

Revision  
B17002428  
Remove Bedroom  
in Basement



**BATH ELEVATION**  
SCALE: 1/4" = 1'-0"



**1 FINISHED BASEMENT FLOOR PLAN**  
5 SCALE: 1/4" = 1'-0"



09-20-2016

DATE: 9/13/16	PROJECT: THE BROOKVILLE	REVISIONS:
DRAWN BY: R.E.M.	SHEET TITLE: FINISHED BASEMENT PLAN	DATE: _____
SHEET # 5 OF 18	RESTRICTIONS ON USE: THESE PLANS ARE THE PROPERTY OF R.E.M. REMODELING. NEITHER THESE PLANS NOR ANY PORTION OF THESE PLANS SHALL BE COPIED, MODIFIED OR REPRODUCED IN ANY MANNER WITHOUT SPECIFIC WRITTEN PERMISSION.	DESCRIPTION: _____
DRAFTING DESIGN BY: ROBERT E. MUEHL AT R.E.M. Remodeling 6350 BARNETT AVE. ELDRSBURG, MD 21784 410-303-324 STRUCTURAL ENGINEERING BY: 540-335-7488 THEODORE PAUL O'DONNELL, P.E. O'DONNELL STRUCTURAL CONSULTING, LLC 507 ALUM SPRINGS RD., BASTE, VA 22810		R.E.M. REMODELING Architectural CAD Drafting Service and Design Consulting EST. 1997 "Drafting your dream is our design"

Approved B17002428  
R.E.