



3687

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.: B19002825

Building Address: 3687 Holly Quarter
City: State: Zip Code:
Suite/Apt. # SDP/NP/BA #:
Subdivision:
Lot: Tax Map: Parcel:
Existing Use:
Proposed Use:
Estimated Construction Cost: \$
Description of Work:
Occupant/Tenant Name:
Was tenant space previously occupied? Yes No
Contact Name:
Address:
City: State: Zip Code:
Phone: Fax:
Email:

Property Owner's Name:
Address:
City: State: Zip Code:
Phone: Fax:
Email:
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:
Address:
City: State: Zip Code:
License No.:
Phone: Fax:
Email:
Engineer/Architect Company:
Responsible Design Prof.:
Address:
City: State: Zip Code:
Phone: Fax:
Email:

Table with 2 columns: Commercial Building Characteristics and Residential Building Characteristics. Includes fields for Height, No. of stories, Gross area, Area of construction, Use group, Construction type, and Roadside Tree Project Permit.

Table with 2 columns: Utilities and Water Supply. Includes checkboxes for Electric, Gas, Public/Private, Sewage Disposal, Heating System, and Sprinkler System.

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 lines for Applicant's Signature, Print Name, Email Address, Date, and Title/Company.

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

Table with 3 columns: AGENCY, DATE, SIGNATURE OF APPROVAL. Rows include State Highways, Building Officials, PSZA (Zoning), PSZA (Engineering), and Health.

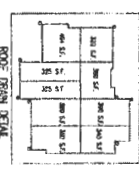
Table with 1 column: DPZ SETBACK INFORMATION. Rows include Front, Rear, Side, Side St., All minimum setbacks met?, Is Entrance Permit Required?, Historic District?, Lot Coverage for New Town Zone, and SDP/Red-line approval date.

Table with 2 columns: Fee Name and Amount. Rows include Filing Fee, Permit Fee, Tech Fee, Excise Tax, PSFS, Guaranty Fund, Add'l per Fee, Total Fees, Sub- Total Paid, Balance Due, and Check.

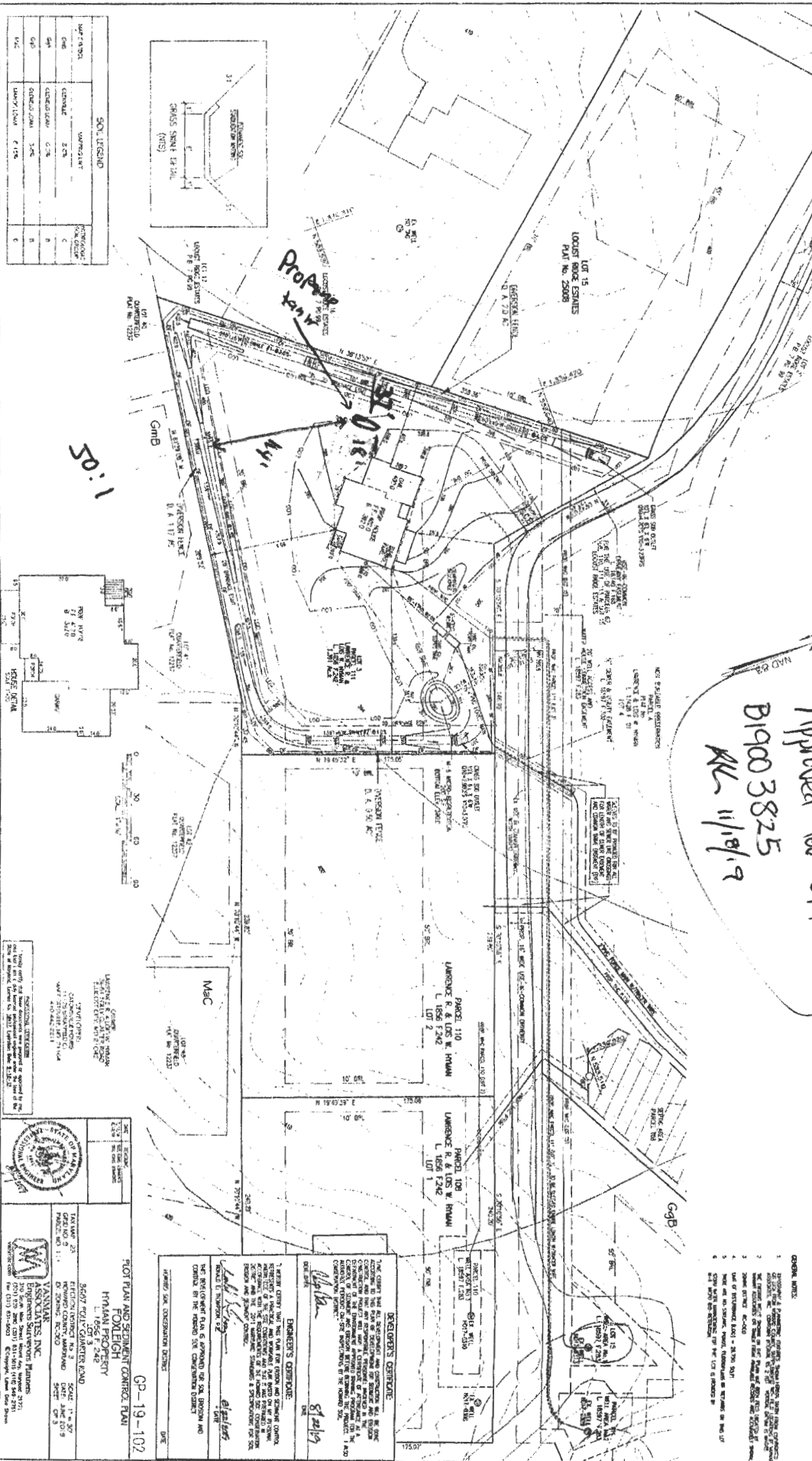
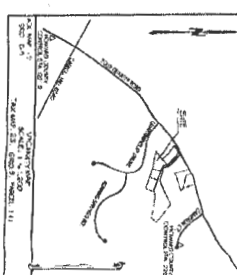
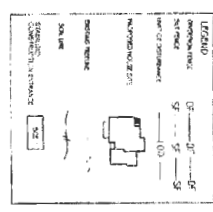
3687

FOLLY QUARTER ROAD  
 ROAD CENTER LINE  
 10' SIDEWALK

PROPERTY	OWNER	ADDRESS	APPROVAL	DATE
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Approved for UPT  
 B19003825  
 AKK 11/8/19



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# CATONSVILLE *Homes*

November 11, 2019

Ms. Cathy Anest  
Chief  
Howard County Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Ellicott City, Maryland 21043

Re: 3687 Folly Quarter Road, Ellicott City, Maryland 21042  
~~B19002055~~ and ~~G19000177~~

*B19003825*

Dear Ms. Anest,

We would like to amend the Plot Plan on file to show the propane tank location.

If you have any questions, please feel free to contact me at 410-442-2211, extension 202.

Sincerely,

*Pam Walter*

Pamela A. Walter  
Controller

**RECEIVED**

NOV 12 2019

LICENSES & PERMITS  
DIVISION



# 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: 6/21/19

Permit No.: B19062055

EC/OK ALL 6/21/19

Building Address: 3087 FOLLY QUARTER ROAD  
 City: EMMERTON State: MD Zip Code: 21042  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Subdivision: FOLLY  
 Lot: 3 Tax Map: 0023 Parcel: 111

Existing Use: VACANT LOT  
 Proposed Use: SFD  
 Estimated Construction Cost: \$ 550,000  
 Description of Work: "GARAGE MILL"  
2 STORY, 3 CAR GARAGE  
4000, 3.5 BATHS

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

Property Owner's Name: LIANCA HANNA  
 Address: 3087 FOLLY QUARTER ROAD  
 City: EMMERTON State: MD Zip Code: 21042  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: lianca.hanna@catnsvillhomes.com

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: LEE SCRANTON  
 Address: 1115 STRATFORD CT  
 City: PHARMACVILLE State: MD Zip Code: 21104  
 Phone: 410-442-2211 Fax: 410-442-2215  
 Email: lee@catnsvillhomes.com

Contractor Company: CEI HOMES LLC  
 Contact Person: LEE SCRANTON  
 Address: 1115 STRATFORD CT  
 City: PHARMACVILLE State: MD Zip Code: 21104  
 License No.: 13447201 MHC# TRD  
 Phone: 410-442-2211 Fax: 410-442-2215  
 Email: lee@catnsvillhomes.com

Engineer/Architect Company: PLANNING AND ARCHITECTS  
 Responsible Design Prof.: LISA WENBACH  
 Address: 640 PHARMACVILLE ROAD  
 City: PHARMACVILLE State: MD Zip Code: 21108  
 Phone: 410-788-0281 Fax: 410-788-1132  
 Email: lw@plandarchitects.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:	1st floor:	
	2nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input checked="" 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: <u>4</u>	
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>	
<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"/> <b>Roadside Tree Project Permit</b>	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input checked="" 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 checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" 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: LEE SCRANTON  
 Email Address: lee@catnsvillhomes.com Date: \_\_\_\_\_  
 Title/Company: CEI HOMES LLC

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
\*\*PLEASE WRITE NEATLY & LEGIBLY\*\*

AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK INFORMATION	Filing Fee	\$
State Highways			Front:	Permit Fee	\$
Building Officials			Rear:	Tech Fee	\$
PSZA (Zoning)			Side:	Excise Tax	\$
PSZA (Engineering)			Side St.:	Guaranty Fund	\$
Health	<u>8/26/19</u>	<u>R. Buehler</u>	All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No	Add'l per Fee	\$
			Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fees	\$
			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	Sub- Total Paid	\$
			Lot Coverage for New Town Zone:	Balance Due	\$
			SDP/Red-line approval date:	Check	#

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

COMPLETE THIS FORM WHEN DROPPING OFF ANY  
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY  
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:

Date: 8/23/19  
To: ~~REMOVED~~ ROBERT BRINKER - HEALTH  
(Person's Name and Division)  
From: PAM - CBI HOMES, LLC (410) 442-2211 x 202  
(Your Name, Company Name and Telephone Number)  
Subject: Project name FOLLEIGH LCT 3  
Project site address 3687 FULLY QUARTER ROAD  
Permit # B 19002055 SDP # \_\_\_\_\_  
Other information pertinent to this project \_\_\_\_\_

✓ Please check the attachments below that you are submitting with this transmittal:

- Letter of response to address plan review comment letter  
 Revised plans and/or revised details: When submitting for a complete re-review, **duplicate sets shall be submitted.**  
 Letter Summarizing Changes  
 Energy conservation calculations  
4 Copies of PLOT PLAN (be specific).  
 Health Department Request  DPZ/ DED Request  Applicant's Request  
 Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # \_\_\_\_\_  
 Other \_\_\_\_\_

SEPTIC TANK / SEPTIC  
PLAN CHANGES

Contact Person Information: (Required)

RON THOMPSON - VAN MAR  
Please Print Name

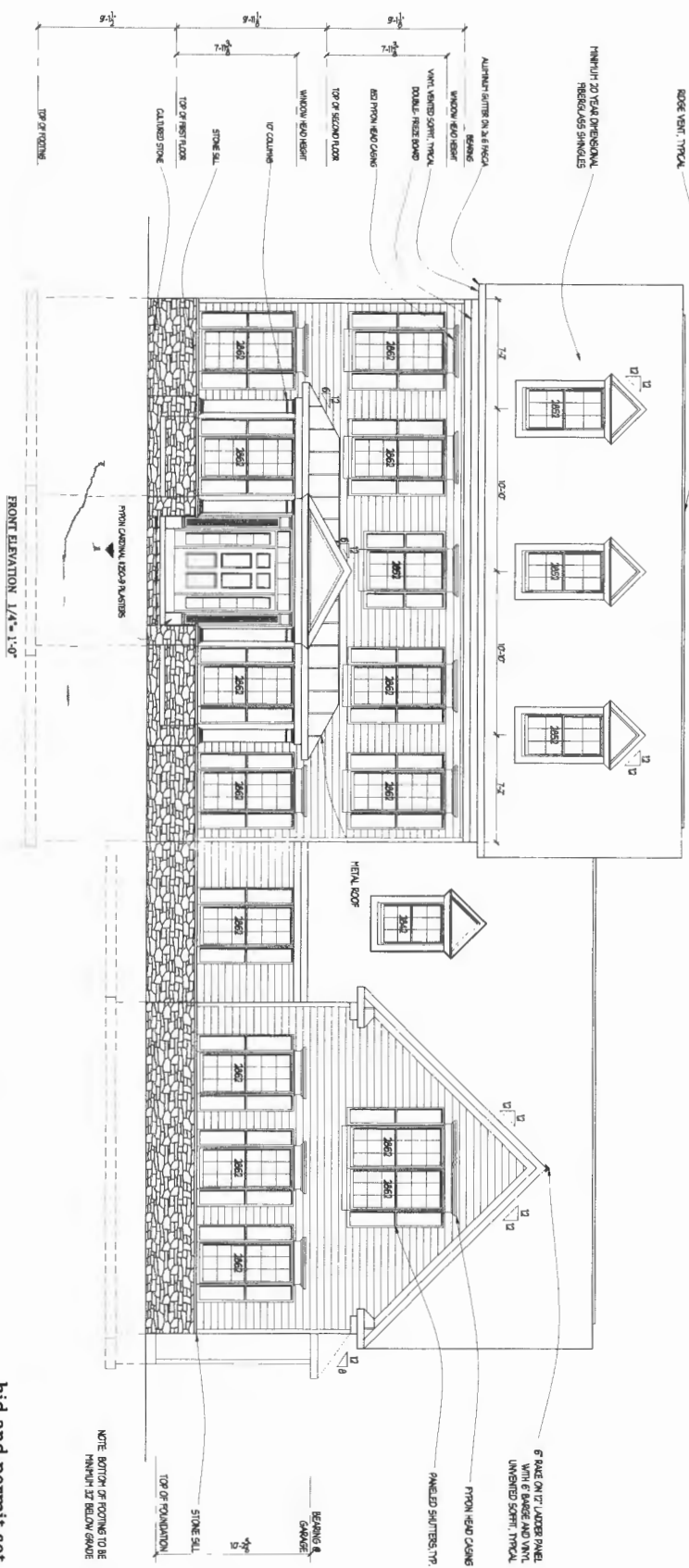
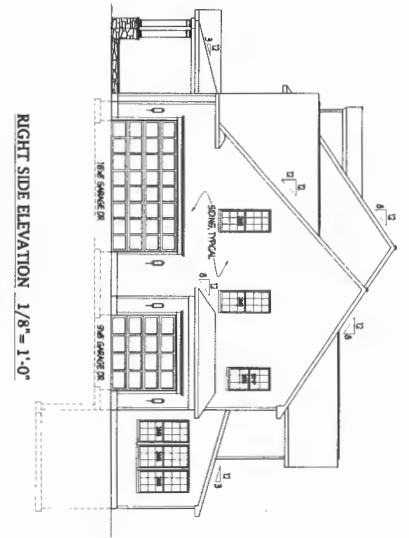
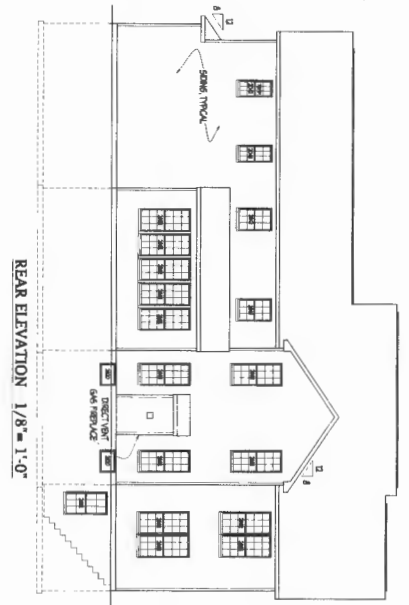
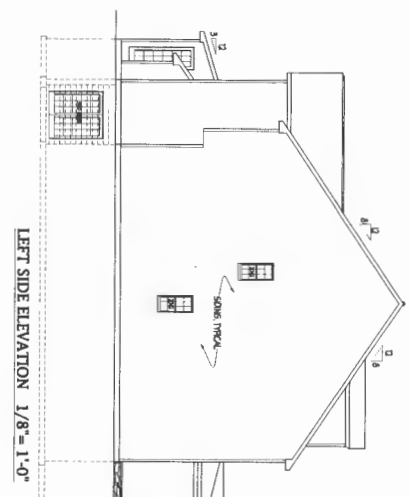
Telephone No: 301-829-2890

E-Mail Address: ron@vanmar.com

**PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.**

Received by AKH

REMOVED SEPTIC ONLY



bid and permit set 5.19.19

1

Project No.: C19.02  
Date: 5/19  
Scale: NOTED

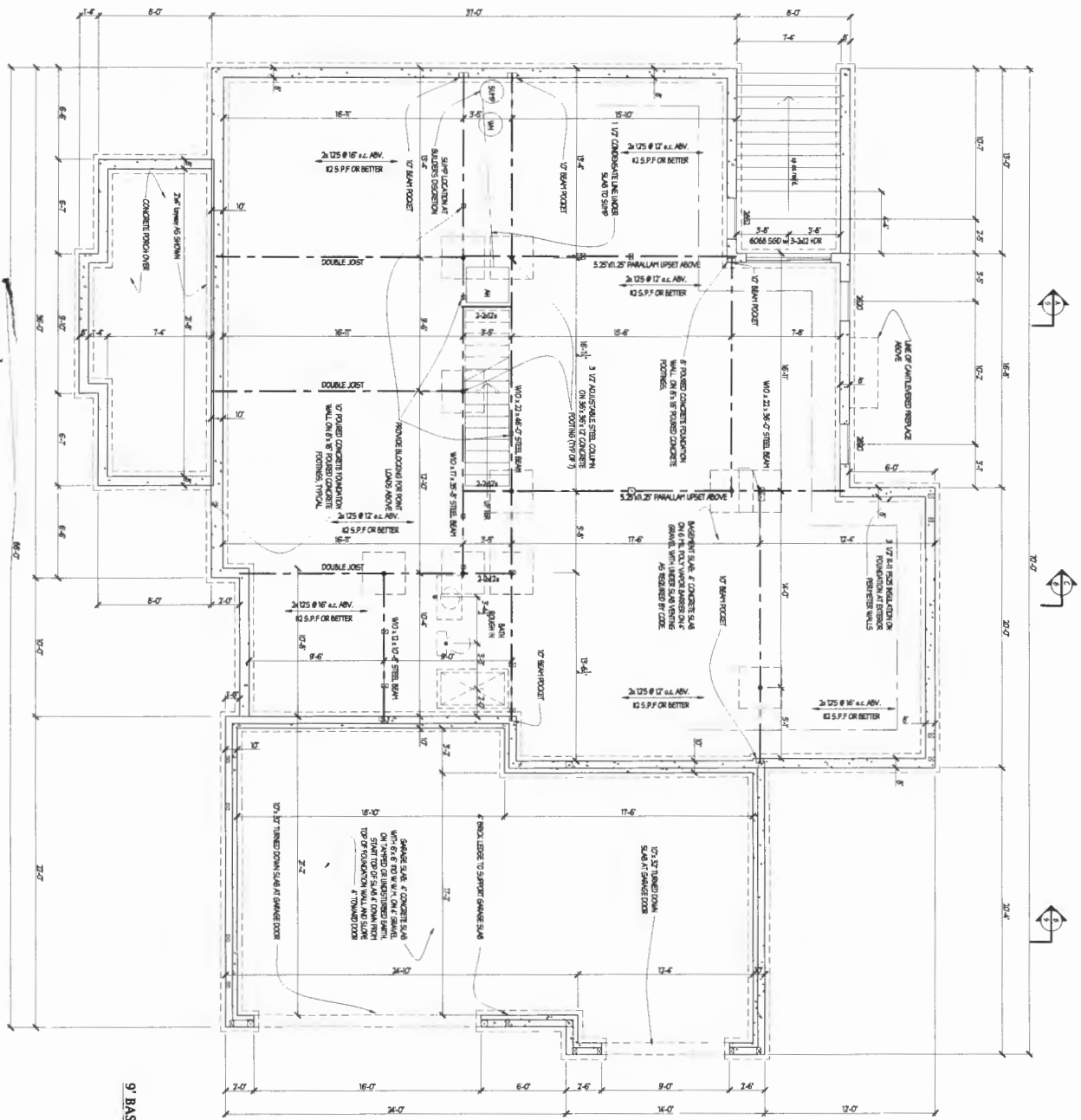
Drawing: ELEVATIONS  
Project: CATONVILLE HOMES  
CHAPEL HILL  
FOXLEIGH LOT 111

Notes:

Plymouth Road Architects  
640 Plymouth Road, Baltimore, MD 21229, 410-788-0281  
PlymouthRoadArchitects.com

HEALTH B19002055

OK MB 2/27/19



*potential for 5th bedroom  
in basement  
'OK'  
reb  
8/27/19*

9' BASEMENT WALLS II

bid and permit set 5.19.19

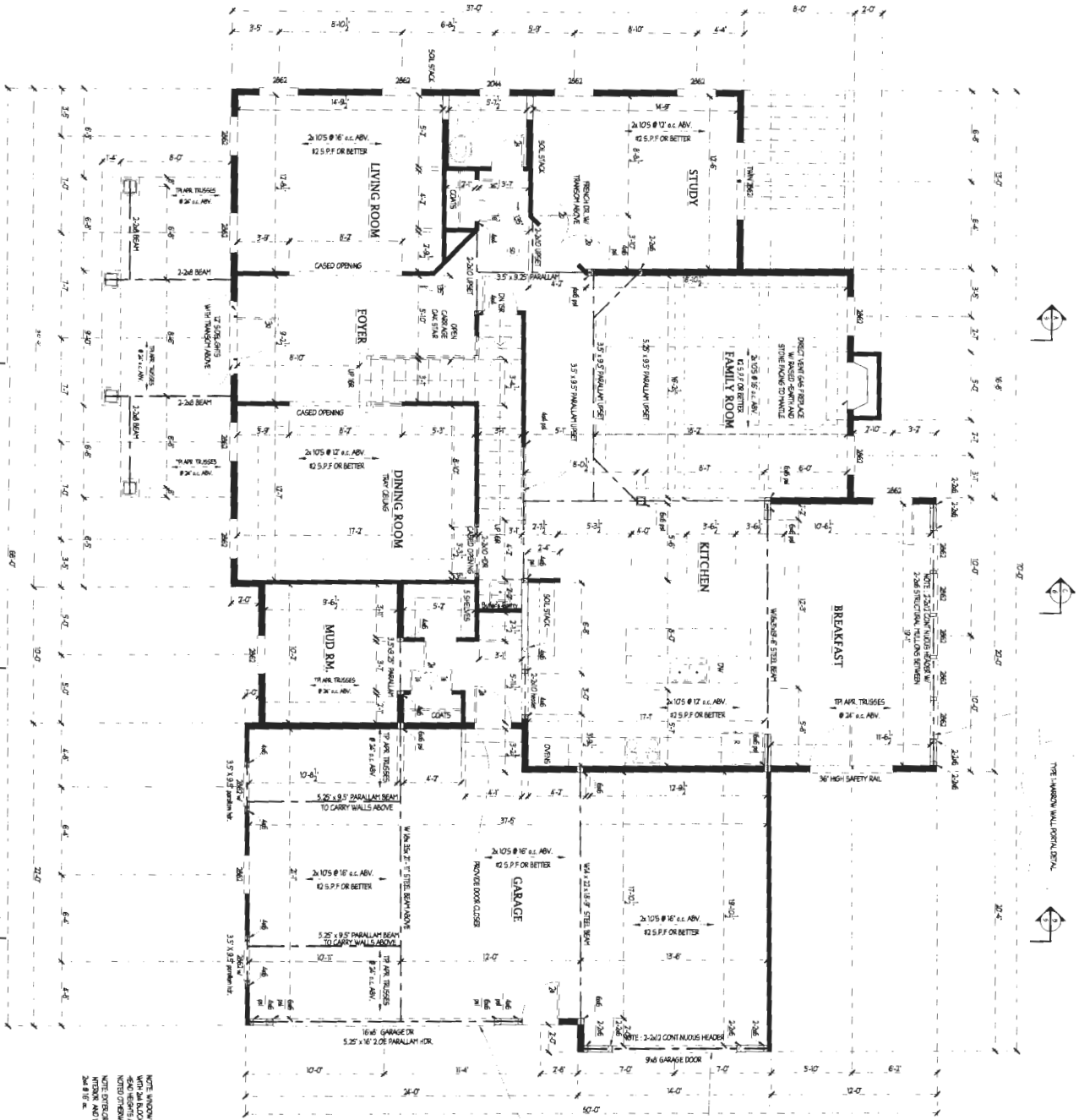
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Project No. C19.02  
Date: 5/19  
Scale: 1/4" = 1'-0"

Drawing: BASEMENT/ FOUNDATION PLAN  
Project: CATONSVILLE HOMES  
CHAPEL HILL  
FOXLEIGH LOT 111

Notes:

**Plymouth Road Architects**  
640 Plymouth Road, Baltimore, MD 21229. 410-788-0281  
PlymouthRoadArchitects.com



*Bedrooms this level  
OK reb 8/27/19*

bid and permit set 5.19.19

5/6/2019 8:47 AM  
C:\p1\19\02\C19.02.dwg

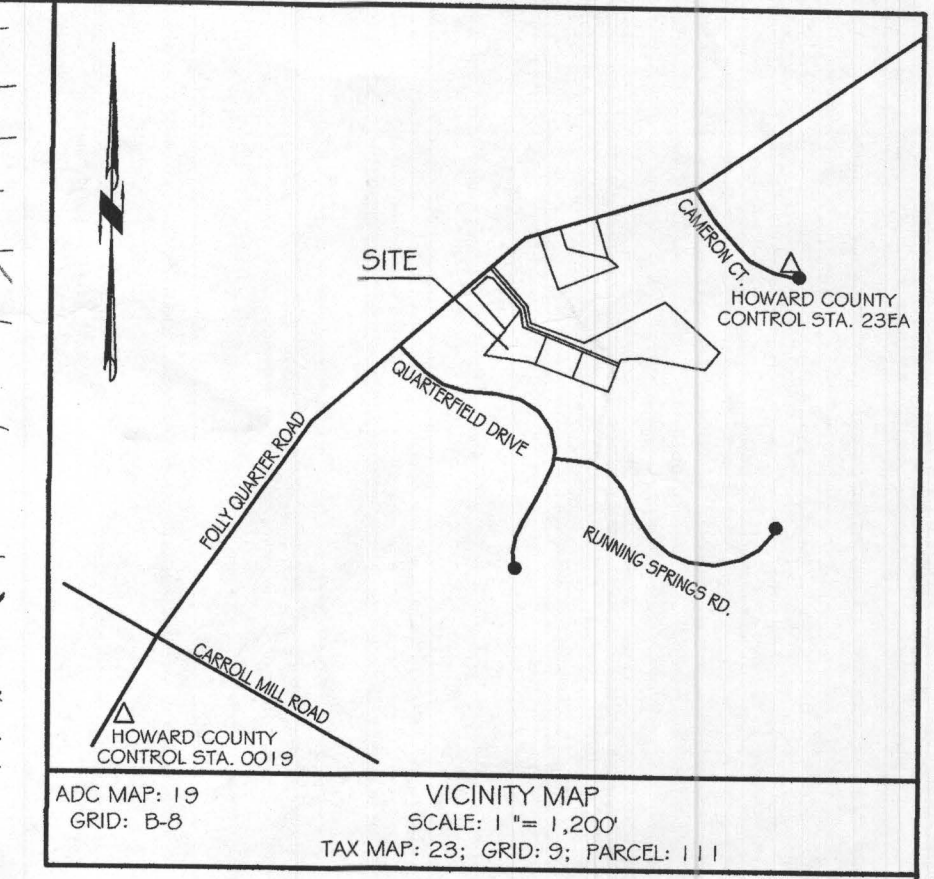
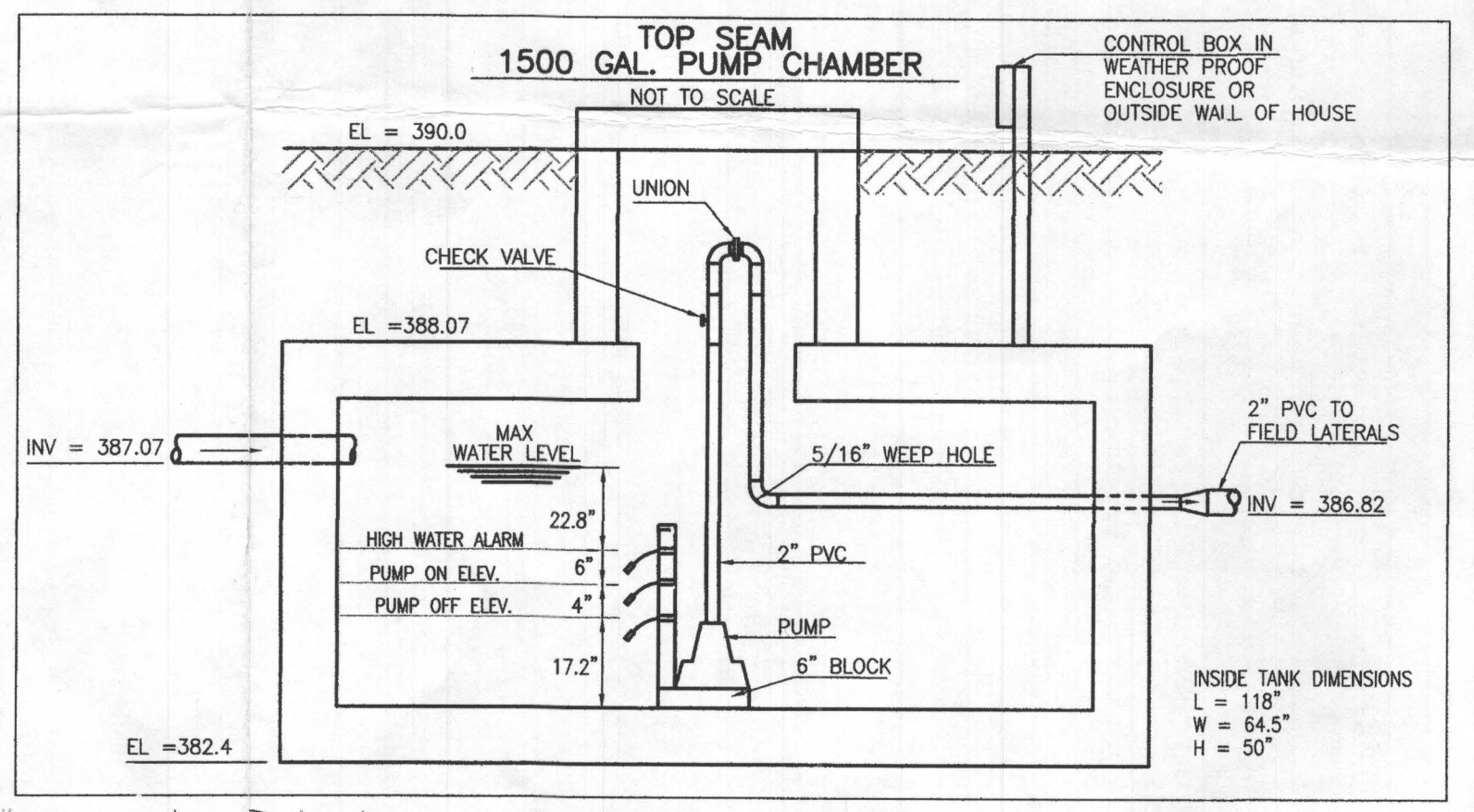
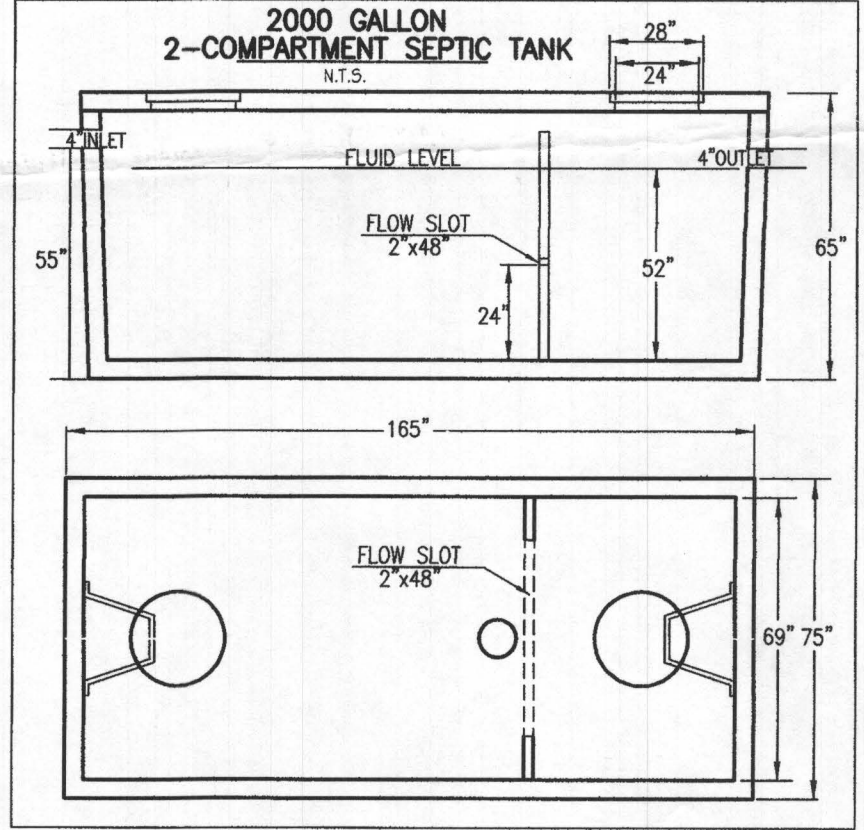
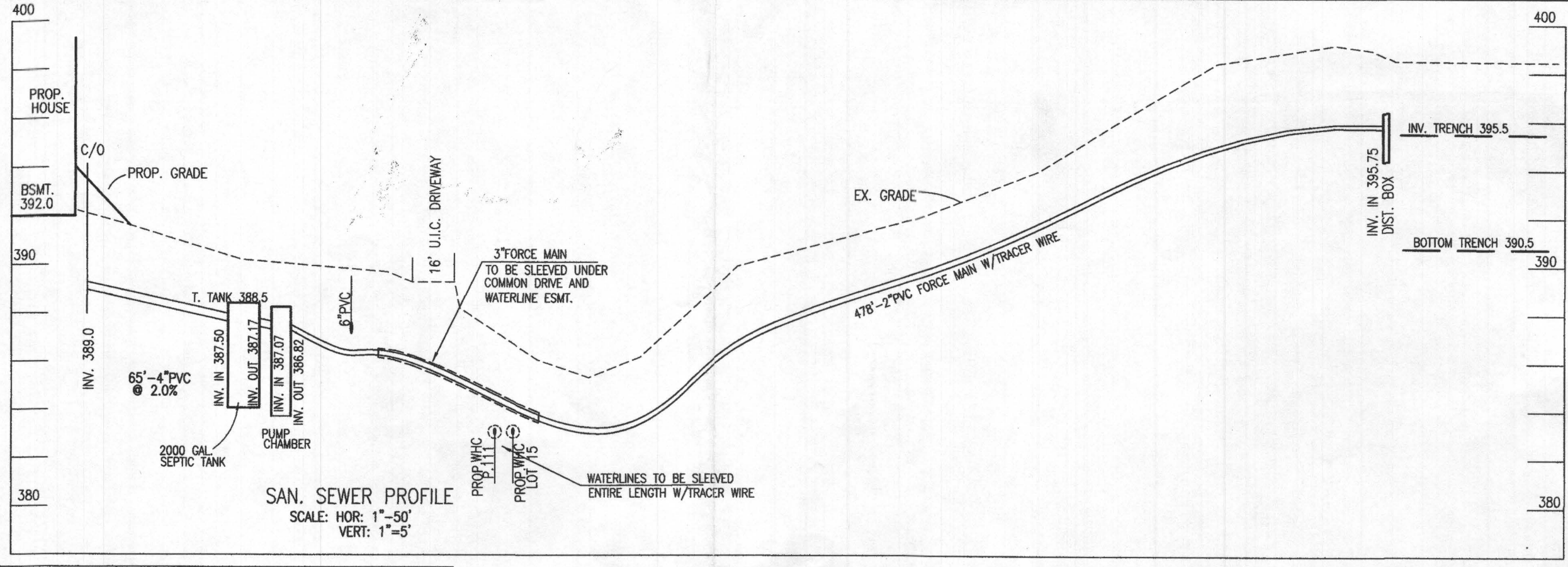
3

Project No.: C19.02  
Date: 5/19  
Scale: 1/4"=1'-0"

Drawing: FIRST FLOOR PLAN  
Project: CATONSVILLE HOMES  
CHAPEL HILL  
FOXLEIGH LOT 111

Notes:

**Plymouth Road Architects**  
640 Plymouth Road, Baltimore, MD 21229 - 410-788-0281  
PlymouthRoadArchitects.com



**GENERAL NOTES:**

- TOPOGRAPHY & PLANIMETRIC FEATURES SHOWN HEREON TAKEN FROM COPYRIGHTED GIS DATA FROM HOWARD COUNTY, SUPPLEMENTED WITH FIELD LOCATIONS BY VANMAR ASSOCIATES, INC. CONTOUR INTERVAL IS 2 FEET. VERTICAL DATUM IS NAVD83.
- THE EXISTING WELLS SHOWN ON THIS PLAN HAVE BEEN FIELD LOCATED BY VANMAR ASSOCIATES OR TAKEN FROM AVAILABLE RECORDS AND ACCURATELY SHOWN.
- ZONING DISTRICT: RC-DEO
- LIMIT OF DISTURBANCE (LOD) = 29,750 SQ.FT.

THERE ARE NO STREAMS, PONDS, FLOODPLAINS OR WETLANDS ON THIS LOT.

**SEPTIC SYSTEM TRENCH DESIGN**

INITIAL NUMBER OF BEDROOMS = 5  
 APPLICATION RATE = 1.2 GPD / sq.ft.  
 DESIGN FLOW: 150 GPD X 5 BEDROOMS = 750 GPD  
 750 GPD / 1.2 GPD/sq.ft. = 625 sq.ft.  
 625 sq.ft. / 3 ft. WIDE TRENCH = 208 LF TRENCH  
 208 LF TRENCH X 0.42 REDUCTION CREDIT = 88 LF TRENCH  
 TRENCH 1-1 EX. GRD=398.5 -INV. TRENCH=395.5 -B. TRENCH=390.5  
 TRENCH 1-2 EX. GRD=398.5 -INV. TRENCH=395.5 -B. TRENCH=390.5

**1st REPLACEMENT**

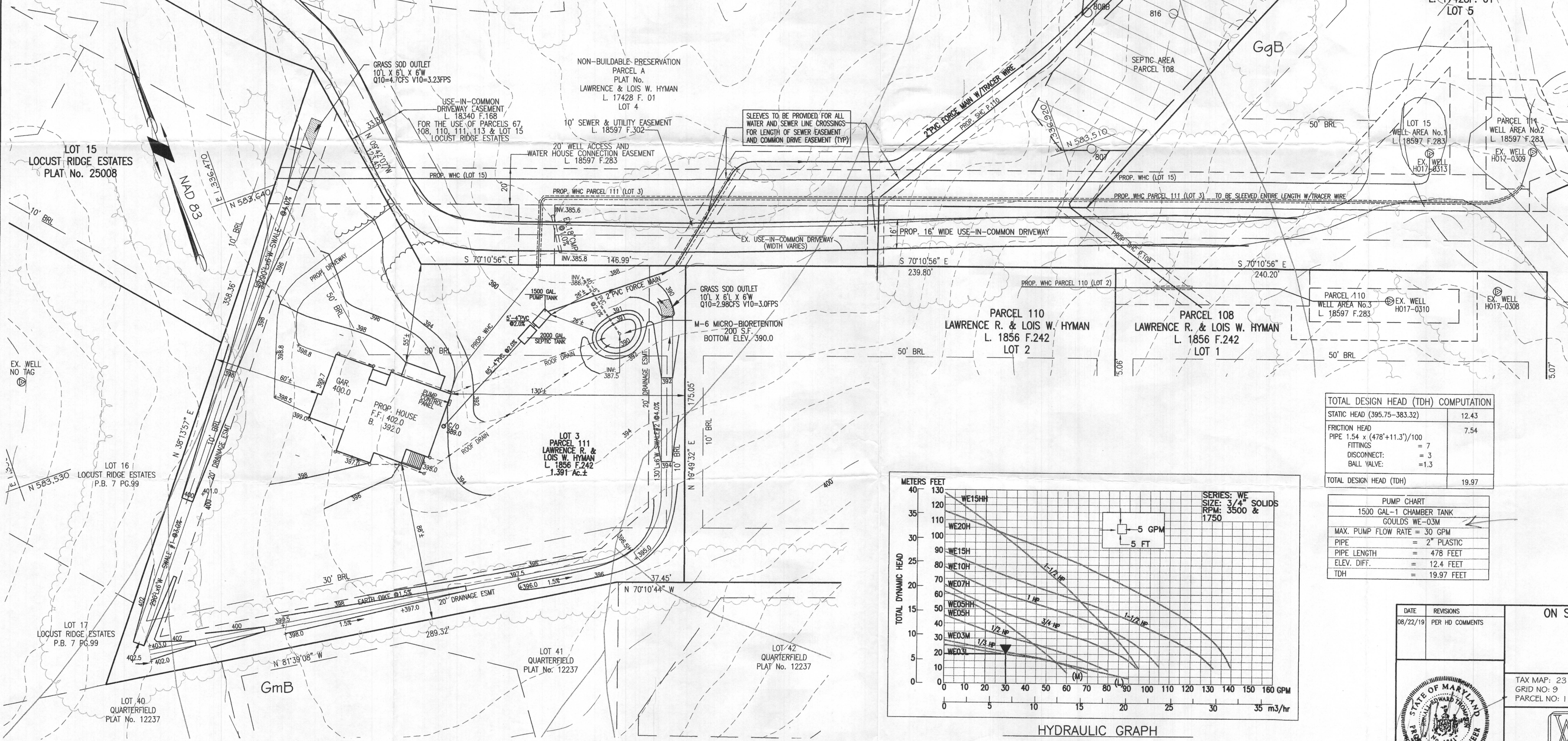
APPLICATION RATE = 1.2 GPD / sq.ft.  
 DESIGN FLOW: 150 GPD X 5 BEDROOMS = 750 GPD  
 750 GPD / 1.2 GPD/sq.ft. = 625 sq.ft.  
 625 sq.ft. / 3 ft. WIDE TRENCH = 208 LF TRENCH  
 208 LF TRENCH X 0.42 REDUCTION CREDIT = 88 LF TRENCH  
 TRENCH 2-1 EX. GRD=397.5 -INV. TRENCH=394.5 -B. TRENCH=389.5  
 TRENCH 2-2 EX. GRD=396.5 -INV. TRENCH=393.5 -B. TRENCH=388.5

**2nd REPLACEMENT**

APPLICATION RATE = 0.8 GPD / sq.ft.  
 DESIGN FLOW: 150 GPD X 5 BEDROOMS = 750 GPD  
 750 GPD / 0.8 GPD/sq.ft. = 938 sq.ft.  
 938 sq.ft. / 3 ft. WIDE TRENCH = 313 LF TRENCH  
 313 LF TRENCH X 0.63 REDUCTION CREDIT = 197 LF TRENCH  
 TRENCH 3-1 EX. GRD=397.0 -INV. TRENCH=394.0 -B. TRENCH=389.0  
 TRENCH 3-2 EX. GRD=396.0 -INV. TRENCH=393.0 -B. TRENCH=388.0

**SITE PLAN NOTES:**

- 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.
- MAXIMUM COVER OVER THE TANK IS 3 FEET. GREATER DEPTH WILL REQUIRE A HEAVY LOAD BEARING TANK.
- ELECTRICAL WORK FOR THE INSTALLATION MUST BE PERFORMED BY A LICENSED ELECTRICIAN.
- THE WELL (TAG #H0-95-2632) HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN.
- 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.

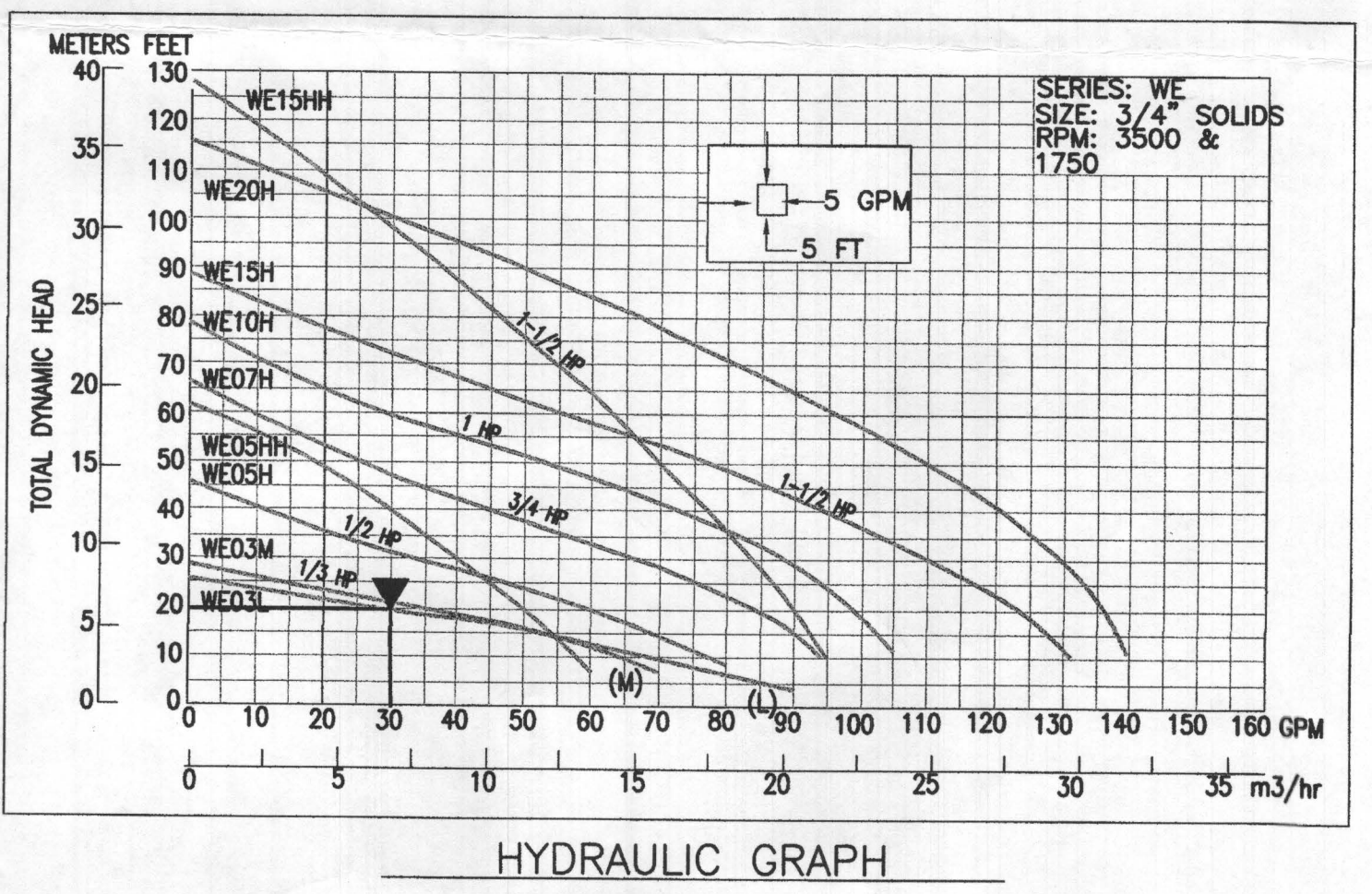
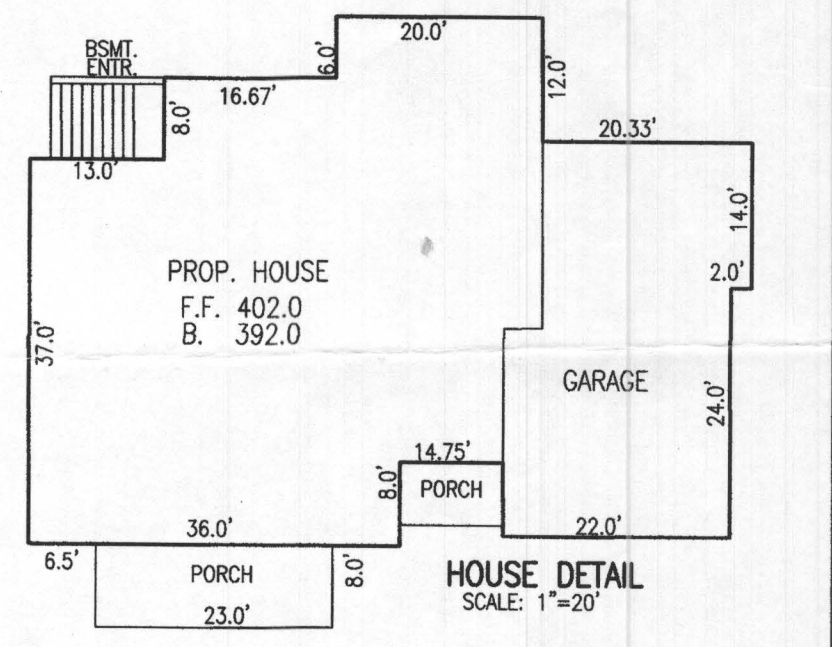


**TOTAL DESIGN HEAD (TDH) COMPUTATION**

STATIC HEAD (395.75-383.32)	12.43
FRICTION HEAD	7.54
PIPE 1.54 x (478'+11.3')/100	
FITTINGS = 7	
DISCONNECT = 3	
BALL VALVE = 1.3	
<b>TOTAL DESIGN HEAD (TDH)</b>	<b>19.97</b>

**PUMP CHART**

1500 GAL-1 CHAMBER TANK	
GOULDS WE-03M	
MAX. PUMP FLOW RATE = 30 GPM	
PIPE = 2" PLASTIC	
PIPE LENGTH = 478 FEET	
ELEV. DIFF. = 12.4 FEET	
TDH = 19.97 FEET	



GP-19-102

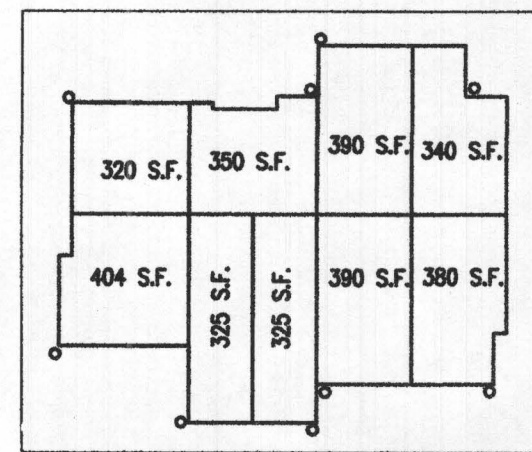
**ON SITE SEWAGE DISPOSAL SYSTEM DESIGN PLAN**  
**FOXLEIGH**  
**HYMAN PROPERTY**  
 L. 1856 F. 242  
 LOT 3  
 3687 FOLLY QUARTER ROAD

DATE: 08/22/19	REVISIONS: PER HD COMMENTS
TAX MAP: 23	ELECTION DISTRICT: No. 3
GRID NO: 9	HOWARD COUNTY, MARYLAND
PARCEL NO: 111	EX. ZONING: RC-DEO

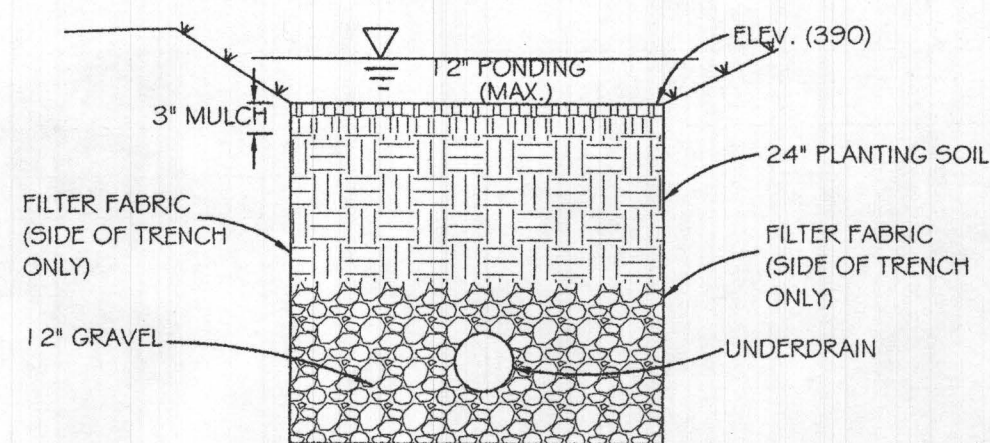
SCALE: 1" = 30'  
 DATE: AUGUST 2019  
 SHEET 1 OF 1

**VANMAR ASSOCIATES, INC.**  
 Engineers Surveyors Planners  
 310 South Main Street Mount Airy, Maryland 21771  
 (301) 829-2890 (301) 831-5015 (410) 549-2751  
 Fax (301) 831-5603 ©Copyright, Latest Date Shown

SWM TREATMENT SUMMARY					
PRACTICE	DRAINAGE AREA	IMPERVIOUS AREA TREATED	METHODOLOGY	VOLUME (ESD) REQUIRED	VOLUME (ESD) PROVIDED
M-6 MICRO-BIORETENTION	5,192 S.F.	5,192 S.F.	ESD = $P_e \cdot R_v \cdot A / 2$ where $P_e = 1.0$ & $R_v = 0.95$	411 c.f.	440 c.f.
TOTAL ESD PROVIDED				411 c.f.	440 c.f.
ESD REQUIRED				411 c.f.	

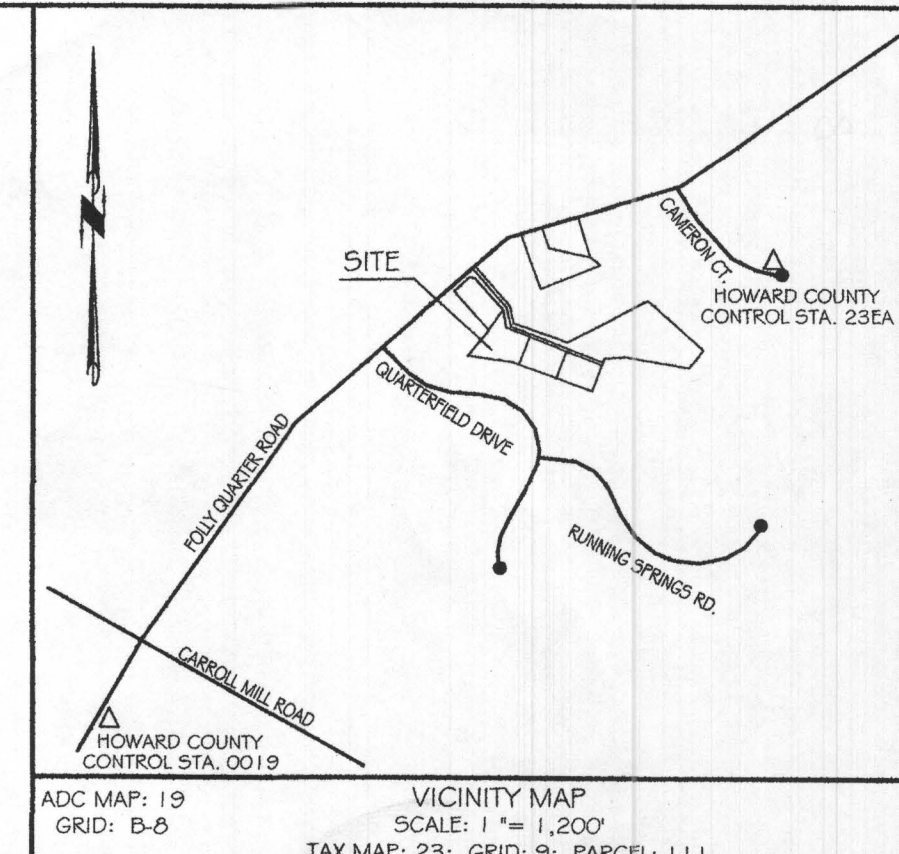


ROOF DRAIN DETAIL  
SCALE: 1"=30'



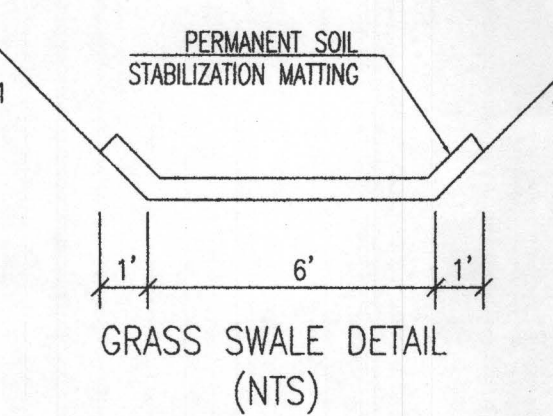
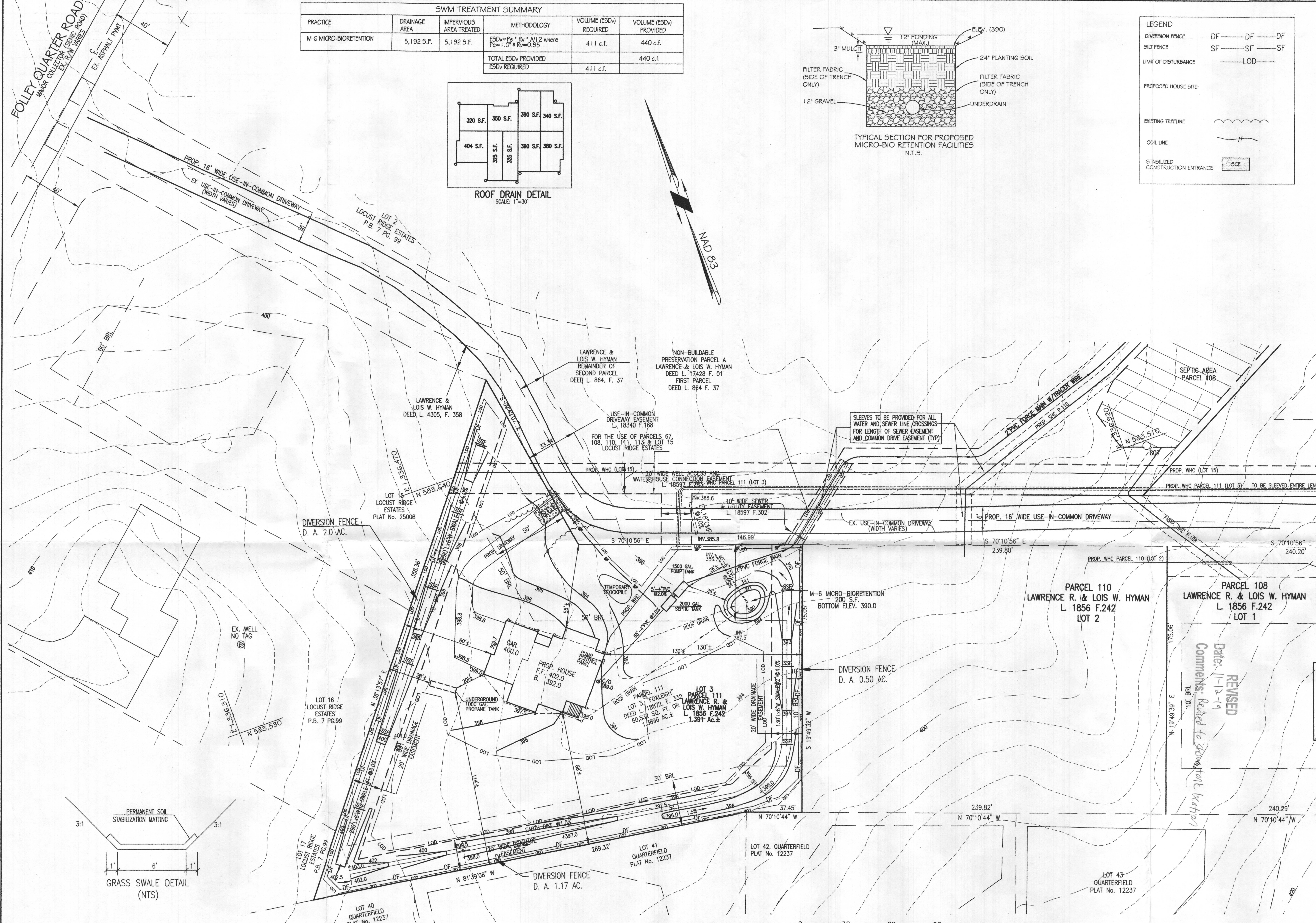
TYPICAL SECTION FOR PROPOSED MICRO-BIO RETENTION FACILITIES  
N.T.S.

LEGEND	
DIVERSION FENCE	DF — DF — DF
SILT FENCE	SF — SF — SF
LIMIT OF DISTURBANCE	— LOD —
PROPOSED HOUSE SITE:	
EXISTING TREELINE	
SOIL LINE	
STABILIZED CONSTRUCTION ENTRANCE	

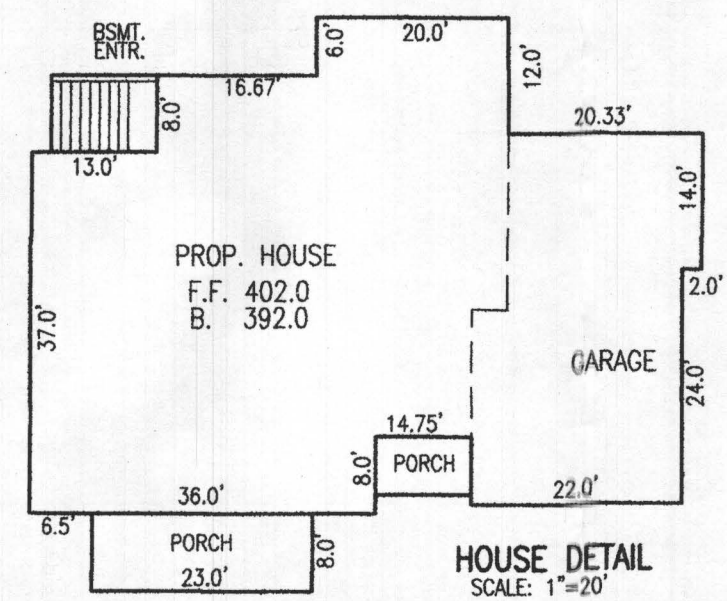


ADG MAP: 19  
GRID: B-8  
VICINITY MAP  
SCALE: 1" = 1,200'  
TAX MAP: 23; GRID: B; PARCEL: 111

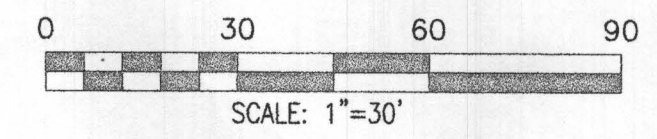
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  - THE EXISTING WELLS SHOWN ON THIS PLAN HAVE BEEN FIELD LOCATED BY VANMAR ASSOCIATES OR TAKEN FROM AVAILABLE RECORDS AND ACCURATELY SHOWN.
  - ZONING DISTRICT: RC-DEO
  - LIMIT OF DISTURBANCE (LOD) = 29,750 SQ.FT.
  - THERE ARE NO STREAMS, PONDS, FLOODPLAINS OR WETLANDS ON THIS LOT.
  - STORM WATER MANAGEMENT FOR THIS LOT IS PROVIDED BY M-6 MICRO-BIO-RETENTION.



GRASS SWALE DETAIL  
(NTS)



HOUSE DETAIL  
SCALE: 1"=20'



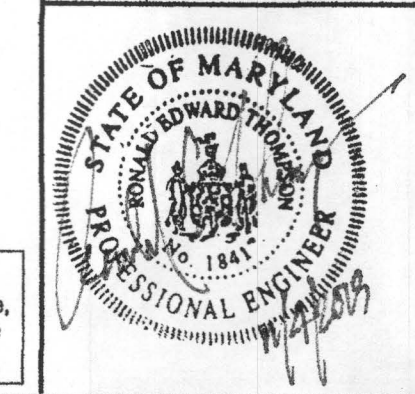
SCALE: 1"=30'

OWNER:  
LAWRENCE R. & LOIS W. HYMAN  
3687 FOLLY QUARTER ROAD  
ELLCOTT CITY, MD. 21042

DEVELOPER:  
CATONSVILLE HOMES  
11175 STRATFIELD CT.  
MARRIOTTSVILLE, MD. 21104  
410-442-2211

**PROFESSIONAL CERTIFICATION**  
I hereby certify that these documents were prepared or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland, License No. 18417, Expiration Date: 9-18-19.

DATE	REVISIONS
11/04/19	PROPANE TANK LOCATION



**DEVELOPER'S CERTIFICATE:**  
I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN OF DEVELOPMENT FOR SEDIMENT AND EROSION CONTROL AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTIONS BY THE HOWARD SOIL CONSERVATION DISTRICT.

DEVELOPER \_\_\_\_\_ DATE \_\_\_\_\_

**ENGINEER'S CERTIFICATE:**  
I HEREBY CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT AND THE 2011 MARYLAND STANDARDS & SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.

RONALD E. THOMPSON, P.E. \_\_\_\_\_ DATE \_\_\_\_\_

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.

HOWARD SOIL CONSERVATION DISTRICT \_\_\_\_\_ DATE \_\_\_\_\_

**REUSED**  
Date: 11-12-19  
Comments: Reused to show final location

SOIL LEGEND		
MAP SYMBOL	MAPPING UNIT	HYDROLOGIC SOIL GROUP
GmD	GLENVILLE 3-8%	C
GgA	GLENELG LOAM 0-3%	B
GgB	GLENELG LOAM 3-8%	B
MaC	MANOR LOAM 8-15%	B

GP-19-102

**PLOT PLAN AND SEDIMENT CONTROL PLAN**  
FOXLEIGH  
HYMAN PROPERTY  
L. 1856 F. 242  
LOT 3  
3687 FOLLY QUARTER ROAD

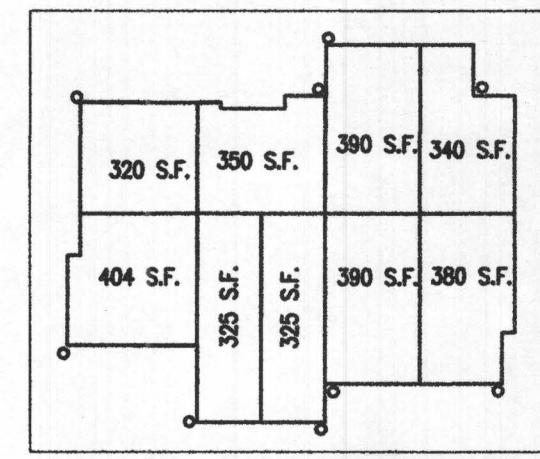
TAX MAP: 23  
GRID NO: 9  
PARCEL NO: 111

ELECTION DISTRICT: No. 3  
HOWARD COUNTY, MARYLAND  
EX. ZONING: RC-DEO

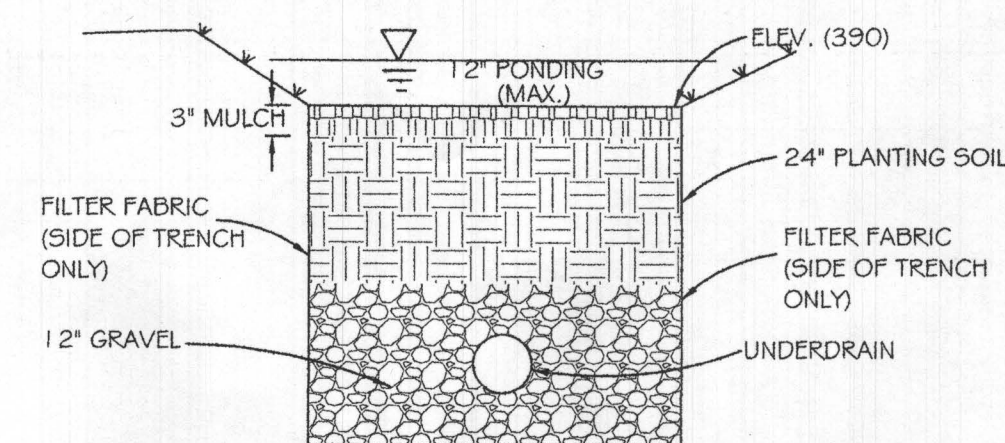
SCALE: 1" = 30'  
DATE: JUNE 2019  
SHEET 1 OF 3

**VANMAR ASSOCIATES, INC.**  
Engineers Surveyors Planners  
310 South Main Street Mount Airy, Maryland 21771  
(301) 829-2890 (301) 831-5015 (410) 549-2751  
Fax (301) 831-5603 ©Copyright, Latest Date Shown

SWM TREATMENT SUMMARY					
PRACTICE	DRAINAGE AREA	IMPERVIOUS AREA TREATED	METHODOLOGY	VOLUME (ESD) REQUIRED	VOLUME (ESD) PROVIDED
M-6 MICRO-BIORETENTION	5,192 S.F.	5,192 S.F.	ESD <sub>v</sub> = P <sub>c</sub> * R <sub>v</sub> * A / 12 where P <sub>c</sub> = 1.0 & R <sub>v</sub> = 0.95	411 c.f.	440 c.f.
TOTAL ESD <sub>v</sub> PROVIDED				411 c.f.	440 c.f.
ESD <sub>v</sub> REQUIRED				411 c.f.	

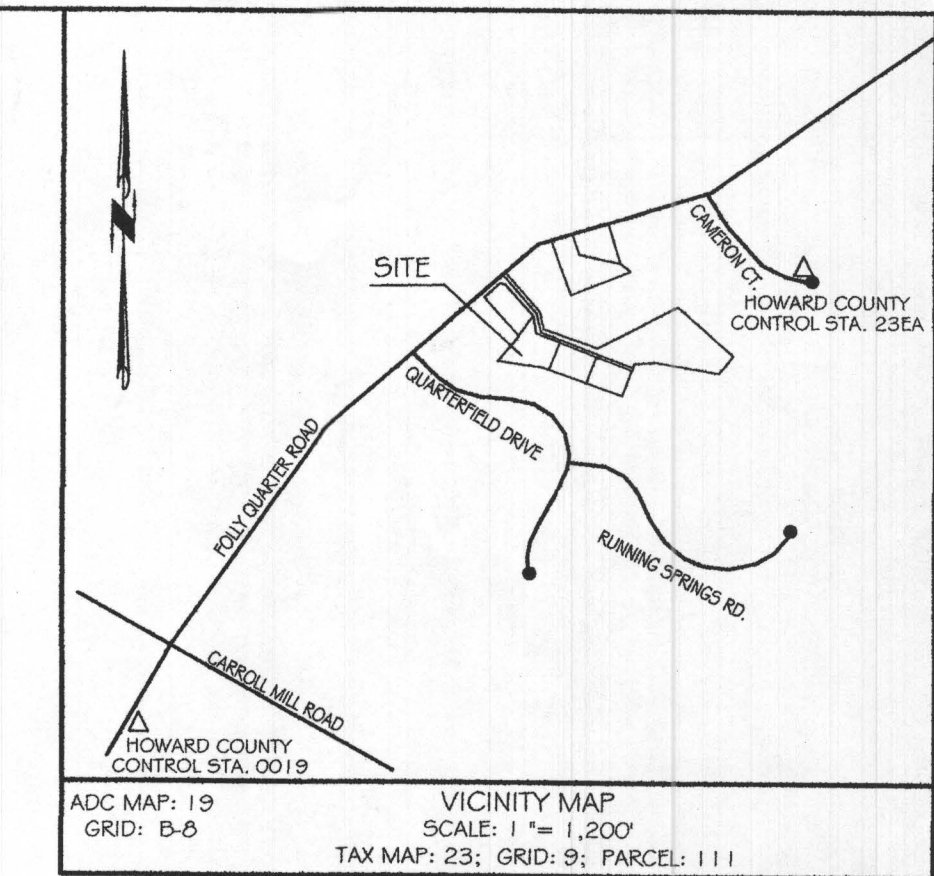


ROOF DRAIN DETAIL  
SCALE: 1"=30'



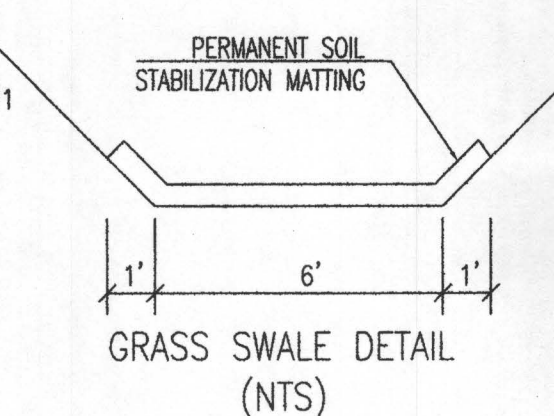
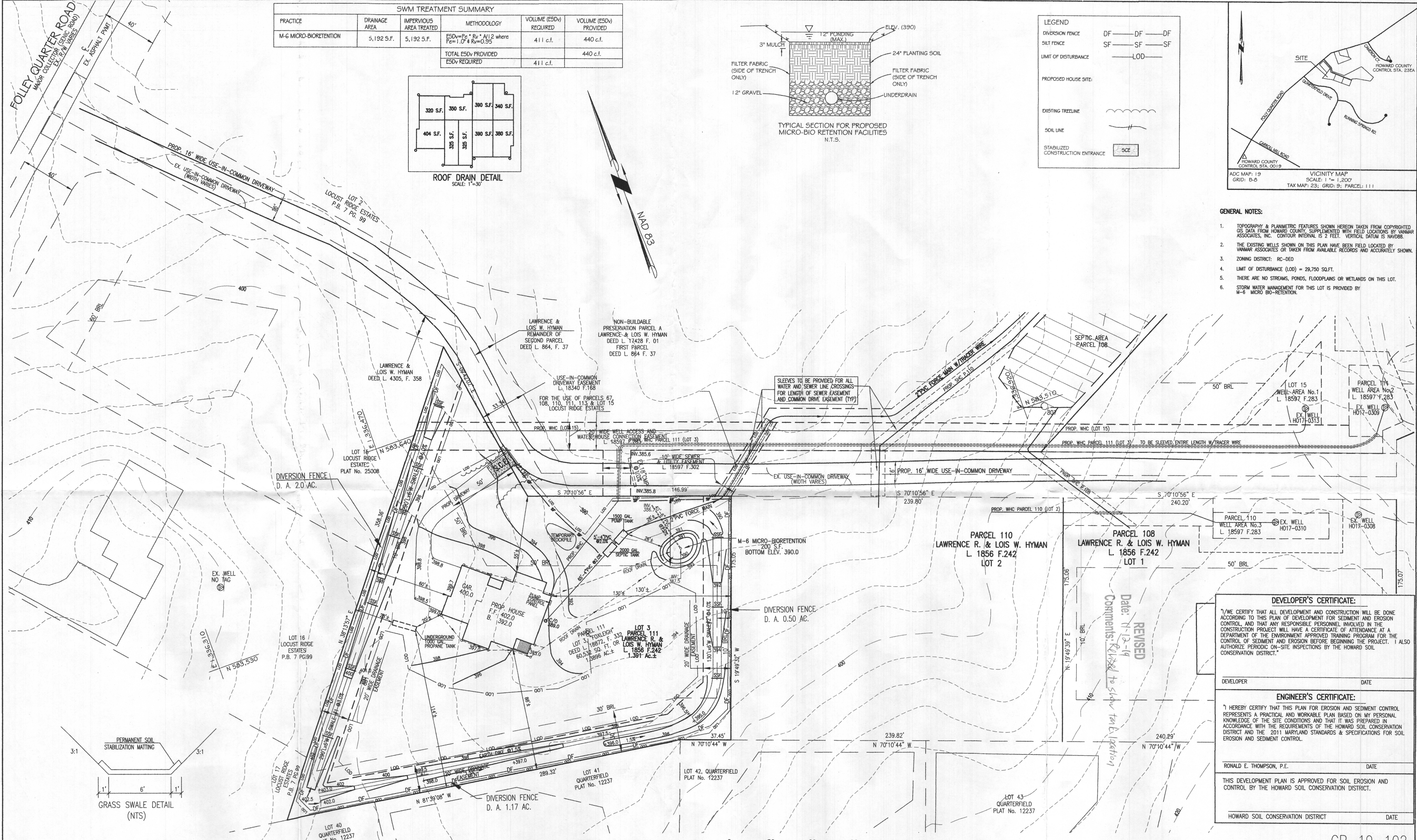
TYPICAL SECTION FOR PROPOSED MICRO-BIO RETENTION FACILITIES  
N.T.S.

LEGEND	
DIVERSION FENCE	DF — DF — DF
SILT FENCE	SF — SF — SF
LIMIT OF DISTURBANCE	LOD —
PROPOSED HOUSE SITE:	
EXISTING TREELINE	—
SOIL LINE	—
STABILIZED CONSTRUCTION ENTRANCE	SCE

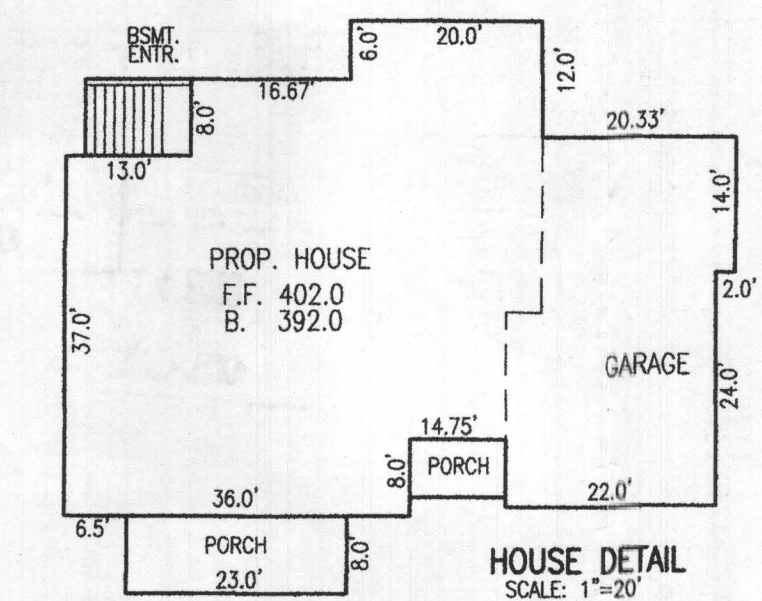


ADC MAP: 19  
GRID: B-6  
VICINITY MAP  
SCALE: 1"=1,200'  
TAX MAP: 23; GRID: 9; PARCEL: 111

- GENERAL NOTES:**
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  - STORM WATER MANAGEMENT FOR THIS LOT IS PROVIDED BY M-6 MICRO-BIO-RETENTION.



GRASS SWALE DETAIL  
(NTS)

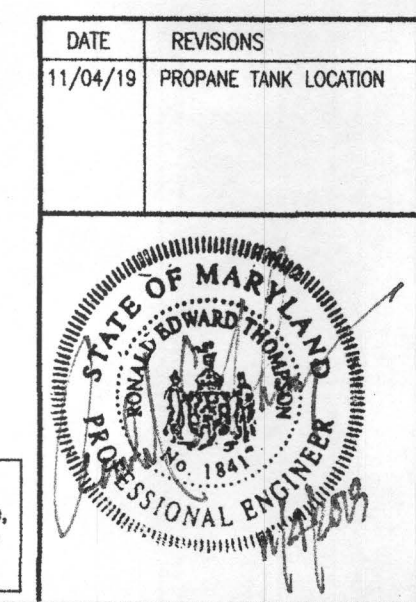


HOUSE DETAIL  
SCALE: 1"=20'

SOIL LEGEND		
MAP SYMBOL	MAPPING UNIT	HYDROLOGIC SOIL GROUP
GmB	GLENVILLE 3-8%	C
GgA	GLENELG LOAM 0-3%	B
GgB	GLENELG LOAM 3-8%	B
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LAWRENCE R. & LOIS W. HYMAN  
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ELLCOTT CITY, MD 21042

DEVELOPER:  
VANMAR ASSOCIATES, INC.  
11175 STRATFIELD CT.  
MARIOTTVILLE, MD 21104  
410-442-2211



**DEVELOPER'S CERTIFICATE:**

I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN OF DEVELOPMENT FOR EROSION AND SEDIMENT CONTROL, AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTIONS BY THE HOWARD SOIL CONSERVATION DISTRICT.

DEVELOPER \_\_\_\_\_ DATE \_\_\_\_\_

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RONALD E. THOMPSON, P.E. \_\_\_\_\_ DATE \_\_\_\_\_

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.

HOWARD SOIL CONSERVATION DISTRICT \_\_\_\_\_ DATE \_\_\_\_\_

DATE	REVISIONS
11/04/19	PROPANE TANK LOCATION

GP-19-102

PLOT PLAN AND SEDIMENT CONTROL PLAN  
FOXLEIGH  
HYMAN PROPERTY  
L. 1856 F. 242  
LOT 3  
3687 FOLLY QUARTER ROAD

TAX MAP: 23  
GRID NO: 9  
PARCEL NO: 111

ELECTION DISTRICT: No. 3  
HOWARD COUNTY, MARYLAND  
EX. ZONING: RC-DEO

SCALE: 1"=30'  
DATE: JUNE 2019  
SHEET 1 OF 3

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(301) 829-2890 (301) 831-5015 (410) 549-2751  
Fax (301) 831-5603 ©Copyright, Latest Date Shown

PROFESSIONAL CERTIFICATION  
I hereby certify that these documents were prepared or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland, License No. 18412, Expiration Date: 9-18-19.

