

RECEIVED

SEP 04 2020

PERMIT NUMBER: B 20003054

DATE ACCEPTED:

LICENSES & PERMITS DIVISION

**RESIDENTIAL BUILDING PERMIT APPLICATION**  
 HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS  
 3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4

**BUILDING SITE ADDRESS** *REQUIRED*

Street Address: **5018 Crape Myrtle Ct** Unit: \_\_\_\_\_  
 City: **Ellicott City** State: **MD** Zip Code: **21042**  
 Subdivision/Village/Complex Name: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grading Permit #: \_\_\_\_\_

**DESCRIPTION OF WORK** *REQUIRED*

Existing Use: **SFD** Proposed Use: **Pavilion kit 16'x16'** Estimated Cost: **\$15,000.00**  
 Trade Work to Be Completed (Separate Permits Required):  Mechanical (HVAC)  Electrical  Plumbing  None  
**16x16 pavilion & 1" x 6" Deck (see 2nd application)**

**PROPERTY OWNER INFORMATION** *REQUIRED*

Owner(s) Name(s) (As it appears on tax records): **Olaf and Lisa Reyes** Primary Residence:  Yes  No  
 Owner's Street Address: **5018 Crape Myrtle Ct**  
 City: **Ellicott City** State: **MD** Zip Code: **21042**  
 Phone: **(443) 834-0209** Email: **olafreyes@verizon.net**

**APPLICANT NAME** *REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION*

Business Name: **ALC Custom Landscapes Inc** Contact Name: **Gregory Coles**  
 Street Address: **5033 Klee Mill Rd S**  
 City: **Sykesville** State: **MD** Zip Code: **21784**  
 Phone: **(410) 549-0309** Email: **gmalcinc@verizon.net**

**CONTRACTOR INFORMATION** *REQUIRED*

Business Name: **ALC Custom Landscapes Inc**  
 Licensee's Name: **Gregory Coles** License #: **70328**  
 Street Address: **5033 Klee Mill Rd**  
 City: **Sykesville** State: **MD** Zip Code: **21784**  
 Phone: **(410) 549-0309** Email: **gmalcinc@verizon.net**

**ARCHITECT/ENGINEER INFORMATION** *INDIVIDUAL WHO SIGNED PLANS IF APPLICABLE*

Business Name: **Bluehouse Architecture LLC** Name: **Melissa Clark**  
 Street Address: **1993 Barley Rd**  
 City: **Marriottsville** State: **MD** Zip Code: **21104**  
 Phone: **(410) 590-3377** Email: **bluehousearch@gmail.com**

**BUILDING CHARACTERISTICS** *REQUIRED*

Primary Structure:  SF Dwelling  SF Townhouse  SF Duplex  Mobile Home  Multi-Family Dwelling (MF\*) Condo:  Yes  No  
 Utilities:  Electric  Gas Water Supply:  Public  Private (Well) Sewage Disposal:  Public  Private (Septic)  
 Heating System:  Electric  Natural Gas  Propane  Other: \_\_\_\_\_ Roadside Tree Project:  No  Yes: # \_\_\_\_\_  
 Sprinkler System:  NFPA 13  NFPA 13R  NFPA 13D  None Fire Alarm System:  Yes  No  Voice Evac

**ADDITIONAL RESIDENTIAL INFORMATION** *(PLEASE SELECT, COMPLETE ALL THAT APPLY)*

Model Name & Options:  
 # of Bedrooms (SF): \_\_\_\_\_ # of efficiency units (MF\*): \_\_\_\_\_ # of 1 BR (MF\*): \_\_\_\_\_ # of 2 BR (MF\*): \_\_\_\_\_ # of 3 BR (MF\*): \_\_\_\_\_  
 # Rooms: \_\_\_\_\_ # Full Baths: \_\_\_\_\_ # Half Baths: \_\_\_\_\_ # Fireplaces: \_\_\_\_\_  
 Garage/Carport Info:  Attached Garage  Detached Garage  Integral Garage  Carport  None  
 Basement/Foundation Info:  Slab on Grade  Post & Pier  Unfinished Basement  Finished Basement:  Full or  Partial  
 1<sup>st</sup> Fl Width: \_\_\_\_\_ 1<sup>st</sup> Fl Depth: \_\_\_\_\_ 2<sup>nd</sup> Fl Width: \_\_\_\_\_ 2<sup>nd</sup> Fl Depth: \_\_\_\_\_ Bsmt Width: \_\_\_\_\_ Bsmt Depth: \_\_\_\_\_  
 Energy Method:  Prescriptive  Performance  UA Alternative  ERI Gross Area: \_\_\_\_\_ sq ft Occupiable Area: \_\_\_\_\_ sq ft

**AGREEMENT/DISCLAIMER** *REQUIRED*

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 ORIGINAL SIGNATURE: \_\_\_\_\_ DATE SIGNED: **9/4/2020**

**FOR OFFICE USE ONLY** CHECKS PAYABLE TO: FINANCE OF HOWARD COUNTY


AGENCIES REQUIRED/APPROVALS:  
 PR  DPZ  DED  HDB  SHA  CID

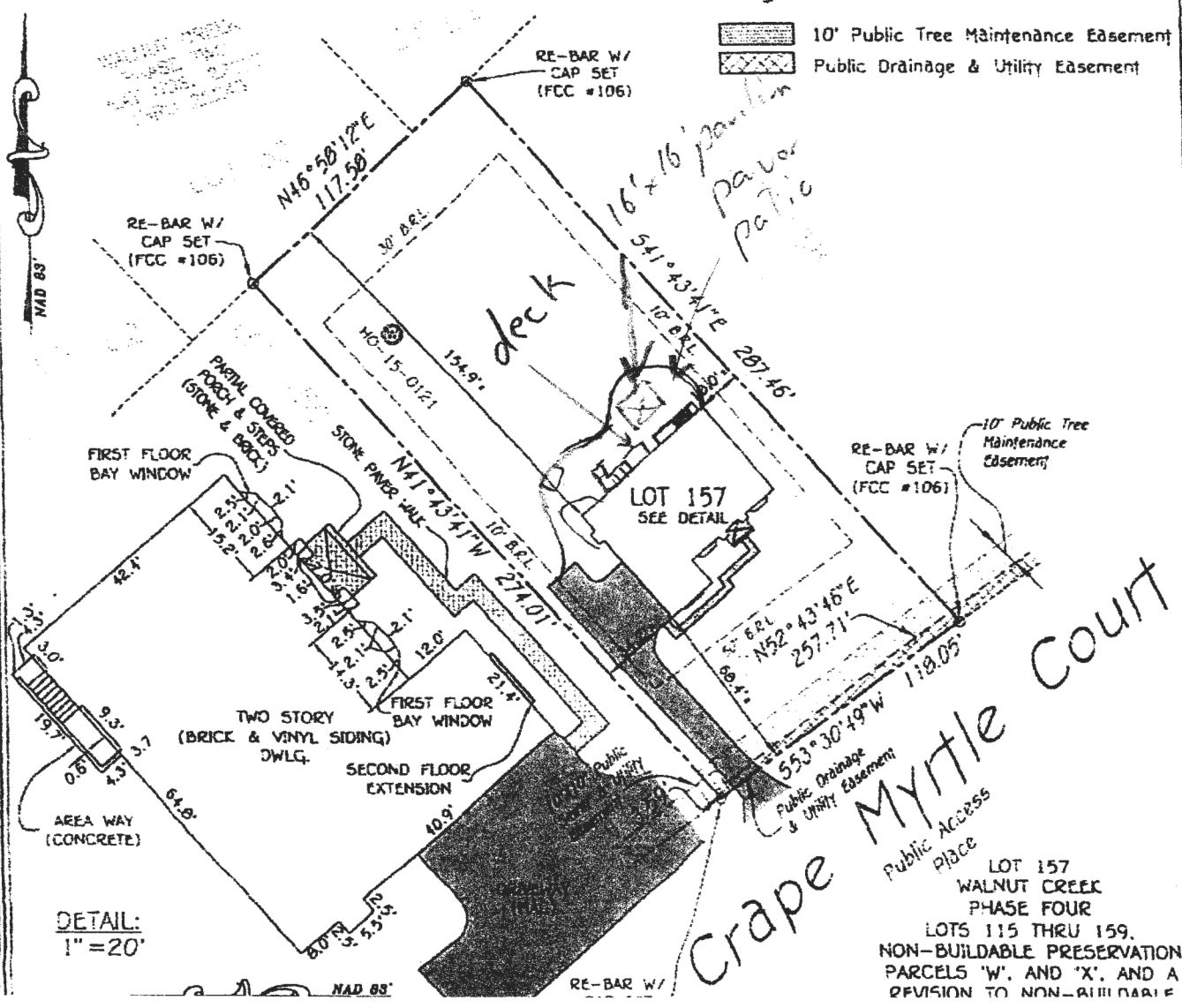
SUBMITTAL FEES: **\$55** PAYMENT: **CR19665** ACCEPTED BY: **DROBBY**

**GENERAL NOTES:**

- 1) THIS LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INSOFAR AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE X ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 24027C0130D EFFECTIVE NOV. 6, 2013.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 1'
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.
- 5) THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HC-12-0121) HAS BEEN FIELD LOCATED BY FISHER, COLLINS AND CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.
- 6) PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROPERTY LINE SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 339, EXPIRATION DATE 10/04/2020.
- 7) LOTS 115 THRU 159 WILL BE SERVED BY LOW PRESSURE SEWER SYSTEM WITH A LIMIT OF (5) FIVE BEDROOMS AT 150 GALLONS PER BEDROOM FOR A TOTAL DESIGN FLOW OF 33,750 GALLONS PER DAY.
- 8) LOTS 115 THRU 159 OF THIS SUBDIVISION ARE CONNECTED TO THE SHARED SEWAGE DISPOSAL FACILITY GOVERNED BY SECTIONS 19.1200 ET SEQ. OF THE HOWARD COUNTY CODE. THE DEVELOPER IS OBLIGATED TO CONSTRUCT THE FACILITY UNDER THE PROVISION OF THE DEVELOPER AGREEMENT NUMBER 50-4441-D DATED APRIL 8, 2009. A BUILDING PERMIT FOR LOTS 115 THRU 159 MAY NOT BE ISSUED UNTIL THE CONSTRUCTION OF THE FACILITY IS COMPLETED. ACTIVITY ON THESE LOTS IS RESTRICTED AND IS SUBJECT TO THE DECLARATION OF COVENANTS, CONDITIONS, RIGHT-OF-ENTRY, AND RESTRICTION FOR SHARED SEWAGE DISPOSAL FACILITY INTENDED TO BE RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND. LOTS 115 THRU 159 SHALL BE ASSESSED SHARED SEWAGE DISPOSAL FACILITY CHARGES AND ASSESSMENTS PURSUANT TO SECTIONS 20.800 ET SEQ. OF THE HOWARD COUNTY CODE.
- 9) BUILDING PERMIT #B-1900182

**Legend**

-  10' Public Tree Maintenance Easement
-  Public Drainage & Utility Easement



**LOT 157  
WALNUT CREEK  
PHASE FOUR  
LOTS 115 THRU 159,  
NON-BUILDABLE PRESERVATION  
PARCELS 'W', AND 'X', AND A  
REVISION TO NON-BUILDABLE**