

Approved 8/31/21

H.O.

Menu Save Reset Cancel Help

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Tanks	B21003248	08/29/2021
Description of Work		
SFD/ INSTALL (1) 1,000 GALLON UNDERGROUND PROPANE TANK		

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
13617	NOBLE	WAY	
Unit Type	Unit #	X Coordinate	Y Coordinate
--Select--		-76.95766	39.19695
City	State	Zip Code	Primary
HIGHLAND	MD	20777	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
11059898	0389	0	0	0	0	RURAL
Legal Description						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
17	5	805101	5				
Plan Area	State Tax Id	Subdivision Name					
		The Estates at River Hill					
Section	Area	Tax Map					
		34					
Grid	Zoning District	ADC Map					
34-16	RR-DEO	4933-G9					
SDP No.	Final Plan No.	WP File No.					
	ECP-16-064						
Record Plat No.	WS Contract No.	FDP No.	Primary				
25085-2509			Yes				
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	5-04A	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner * (This section is required.)

Search Reset Clear

Name *		
MULPURI MURALIDHAR		
Address Line 1		
7875 RIVER ROCK WAY		
Address Line 2		
Address Line 3		
Mail City	Mail State	Mail Zip Code
COLUMBIA	MD	21044
Phone	Primary	
301-725-3232	Yes	
E-mail		
Cell Number	Fax Number	

Professionals (This section is not required.)

Search Reset Clear

License # *	Business Name		
20100103851	THE H. J. POIST GAS COMPANY, INC		
License Type *	First Name	Middle Name	Last Name
Propane Gs	SEAN	MICHAEL	UNDERWOOD
Primary	Address Line 1		
Yes	360 MAIN STREET		
	Address Line 2		
	City	State	ZIP Code
	LAUREL	MD	20707-0000
	Phone 1	Phone 2	Fax
	4434149582		
	E-mail		

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type *	First Name	MI	Last Name
Applicant	MICHELLE		CLANCY
Relationship	Full Name		
Applicant	MICHELLE CLANCY		
Primary	Organization Name		
Yes	APPLIED & APPROVED PERMITS LLC		
	Street Address		
	P.O. BOX 310		
	Address Line 2		
	City	State	Zip Code
	PERRY HALL	MD	21128
	Phone	Cell	Fax
	443-340-1229		
	E-mail *		
	MICHELLE@APPLIEDANDAPPROVED.COM		

Addtl Info

Est Construction Cost *	Housing Units *	Number of Buildings *	Public Owned
2000	0	0	No
Construction Type			
329 - Structures Other Than Buildings (Retaining Walls/Tents)			

TANK INFORMATION

RESIDENTIAL TANK INFORMATION

Capital Project-No Fee *	Capital Project Number	Fee Exempt *	Roadside Tree Project Permit *	Roadside Tree Permit #
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Existing Use	Number of Tanks Installed *	Number of Tanks Removed *		
SFD	1	0		
Water Supply	Sewage Disposal	Expiration Date	Relocate Existing Tank *	
Private	Private	2/26/2022	0	

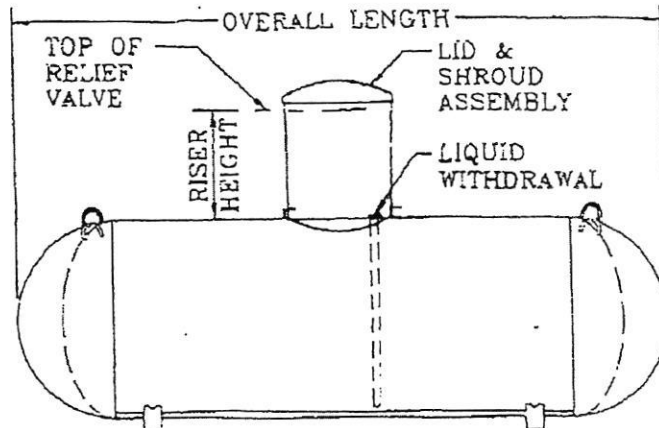
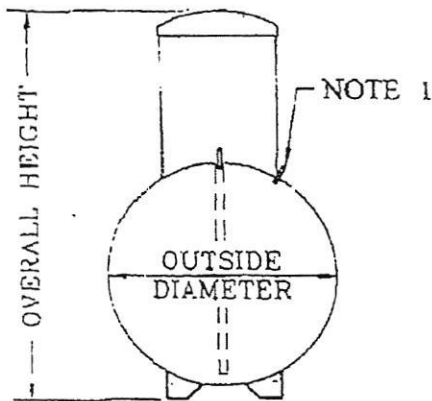
PAYMENT INFORMATION

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

Submit Cancel

TRINITY INDUSTRIES, INC.

Underground Vesse



General Specifications

Conforms to the latest edition and addenda of the ASME, Section VIII, div.1 code for Pressure Vessels. Complies with NFPA 58 and is listed by Underwriters Laboratories, Inc.

Rated at 250 psig from -20°F. to 125°F. All tanks may be evacuated to a full (14.7 psi) vacuum.

Vessel Finish: Coated with epoxy red powder.

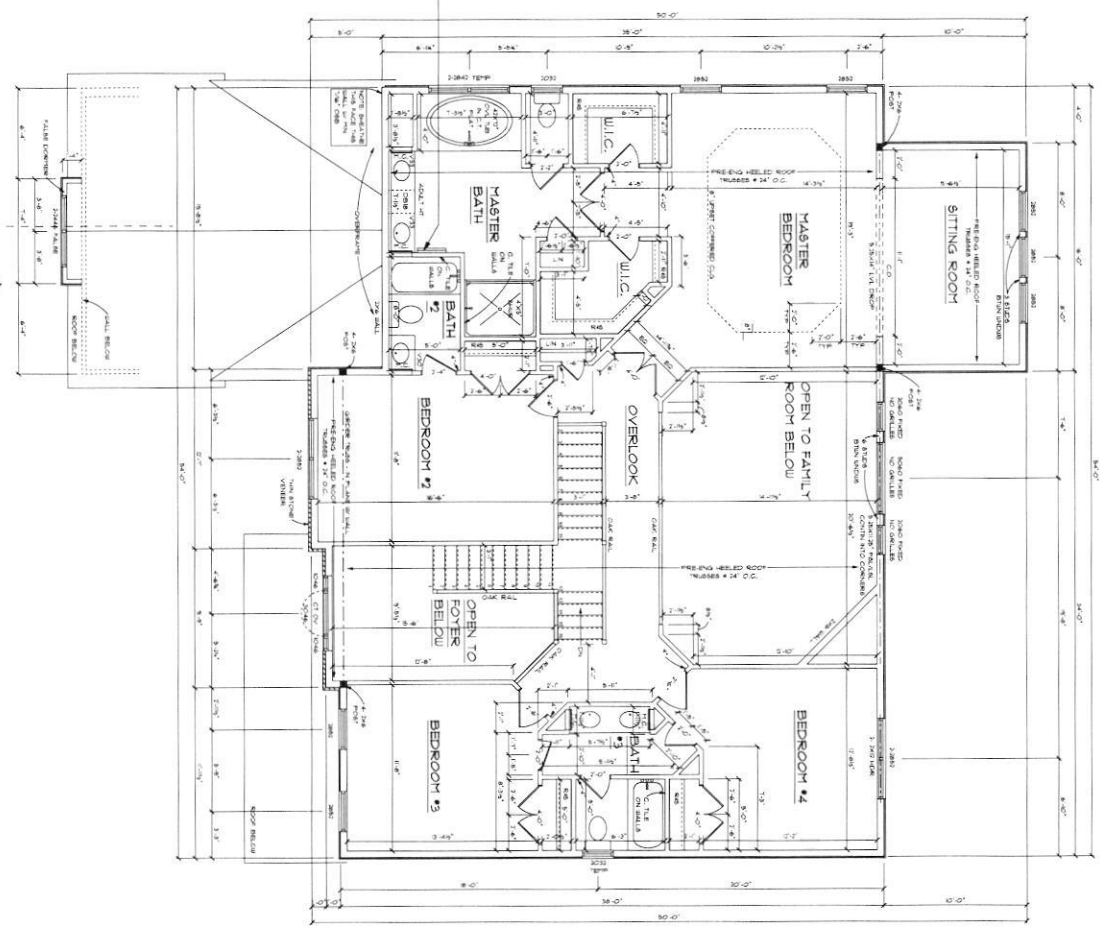
Applicable federal, state or local regulations may contain specific requirements for protective coatings and cathodic protection. The purchaser and installer are responsible for compliance with such federal, state or local regulations.

All vessel dimensions are approximate

WATER CAPACITY	OUTSIDE DIAMETER	HEAD TYPE	OVERALL LENGTH	OVERALL HEIGHT		WEIGHT	QUANTITY IN FULL LOAD
				Riser Height			
				14"	28"		
120 wg 454.2 L	24" 609.6 mm	Ellip	5' - 5 7/8" 1671.6 mm	3' - 9 7/8" 1165.2 mm	4' - 8 3/8" 1431.9 mm	252 lbs. 114.3 kg	63
250 wg 946.3 L	31.5" 800.1 mm	Hemi	7' - 2 1/2" 2197.1 mm	4' - 5 3/8" 1355.7 mm	5' - 3 3/8" 1609.7 mm	472 lbs. 214.1 kg	42
320 wg 1211.2 L	31.5" 800.1 mm	Hemi	8' - 11 3/4" 2736.9 mm	4' - 5 3/8" 1355.7 mm	5' - 3 3/8" 1609.7 mm	588 lbs. 266.7 kg	35
500 wg 1892.5 L	37.42" 950.5 mm	Hemi	9' - 10" 2997.2 mm	4' - 11 3/8" 1506.6 mm	5' - 9 7/8" 1773.2 mm	921 lbs. 417.8 kg	25
1000 wg 3785.0 L	40.96" 1040.4 mm	Hemi	15' - 10 7/8" 4846.6 mm	5' - 2 7/8" 1597.0 mm	6' - 1 3/8" 1863.7 mm	1731 lbs. 785.2 kg	15
2000 wg 3785.6 L	46.614" 1183.9 mm	Ellip	23' - 9 3/8" 7248.5 mm	5' - 8 13/16" 1747.8 mm	6' - 7 5/16" 2014.5 mm	3685 lbs. 1671.4 kg	8

NOTE: ELECTRIC
 ADD 2 BASKET 2"
 LONG W/ WALL THERMOSTAT
 IN MASTER BATHROOM OVER
 GARAGE

ADULT HEIGHT MASTER
 BATH VANITIES
 NOTE CARPENTER
 KASE MC 4"



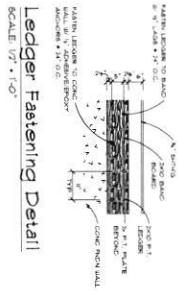
NOTE: 3/4" WALL THICK
 APPROX. 1171 SF 2ND FLOOR
 APPROX. 127 SF OPEN FLOOR
 APPROX. 319 SF OPEN FAMILY ROOM
Second Floor Plan
 SCALE: 1/4" = 1'-0"

NOTE: 9' CEILING
 2X6 EXTERIOR WALLS

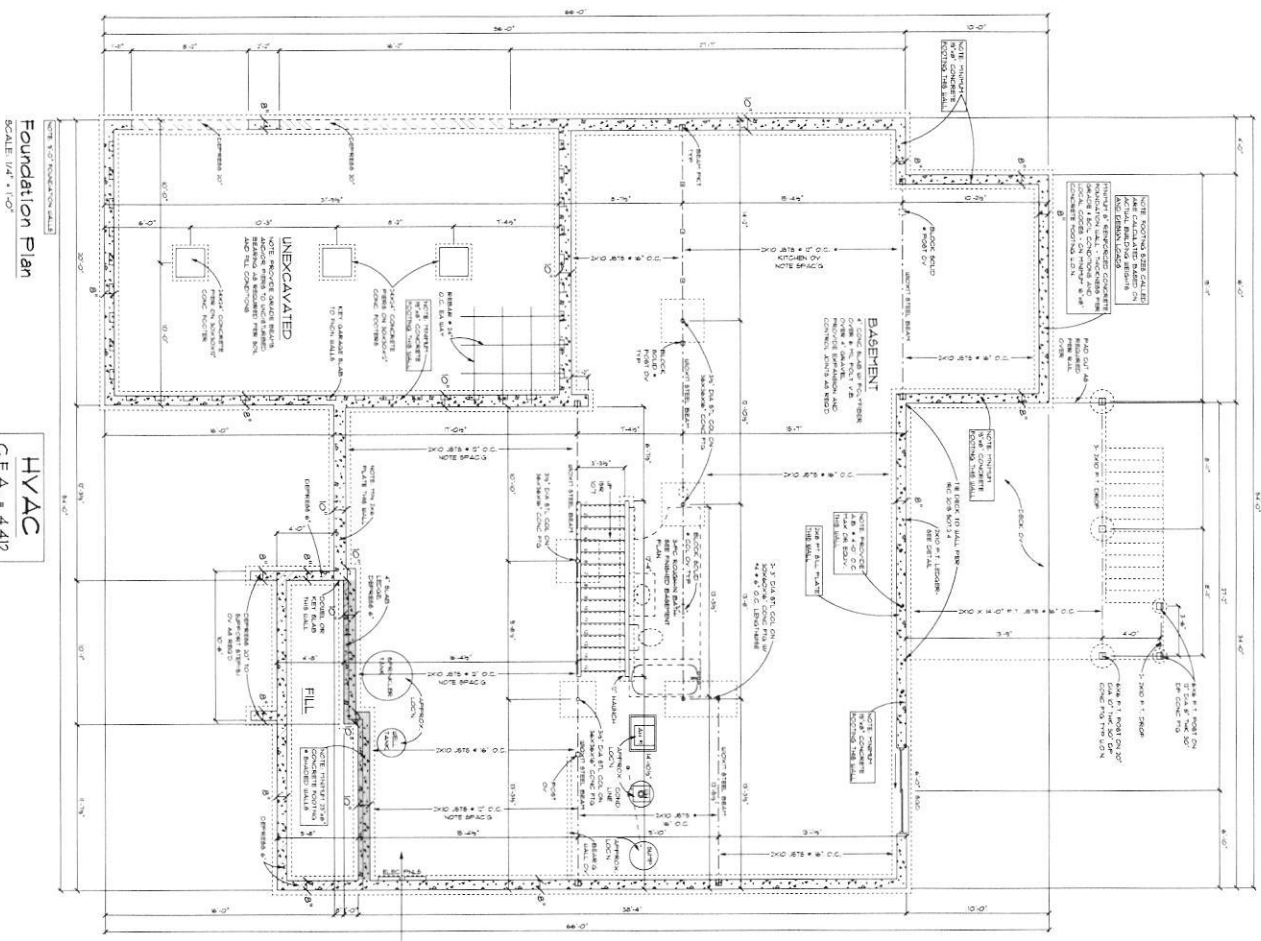
2015 CODE

The Yorkshire Manor II - 3 Car





Ledger Fastening Detail
SCALE: 1/2" = 1'-0"



Foundation Plan
SCALE: 1/4" = 1'-0"

HVAC
C.F.A. # 4,412

2015 CODE

- NOTES**
- 1. 3000 PSI CONCRETE, STAY-IN-PLACE FORMWORK, REINFORCED WITH #4 BARS.
 - 2. ALL WALLS TO BE CONSTRUCTED WITH 2" MIN. CLEARANCE FROM ADJACENT WALLS.
 - 3. ALL WALLS TO BE CONSTRUCTED WITH 2" MIN. CLEARANCE FROM ADJACENT WALLS.
 - 4. ALL WALLS TO BE CONSTRUCTED WITH 2" MIN. CLEARANCE FROM ADJACENT WALLS.
- NOTE 9'-0" FOUNDATION WALLS**

- NOTE: PUMPER**
- 1. PASSIVE RADON SYSTEM
 - 2. 3" PVC PIPE VENTED THROUGH ROOF (LOCATION PER PUMPER)
- HVAC: EQUIPMENT - GOODMAN**
- 1. ZONE 1: 50% EFFICIENCY PACKAGE GAS FURNACE, 1.5 TON
 - 2. ZONE 2: 14 SEER HEAT PUMP, 3/5 TON

REV	DATE	DESCRIPTION

DATE: 06-17-2019
SHEET NO: A-3
© 2019

The Yorkshire Manor II - 3 Car



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

DILP 2019 301
Date Received: _____



Permit No.: **B19003290**

Jing Address: **13617 NOBLE WAY LPER PLOT PLAN**
 City: **Highland** State: **MD** Zip Code: **20777**
 e/Apt. #: _____ SDP/WP/BA #: **GP-19-080**
 division: **ESTATES at River Hill**
5 Tax Map: **34** Parcel: **389**

Property Owner's Name: **ESTATES at River Hill, LLC**
 Address: **3675 Park Ave**
 City: **FC** State: **MD** Zip Code: **21043**
 Phone: **443.324-9806**; **410.480.0013**
 Email: **TKeane@TrinityHomes.com**

isting Use: **VACANT LOT**
 ropsed Use: **Building New Single Family**
 imated Construction Cost: \$ **300,000.00**

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

cription of Work: **3 Car Garage, DR., LR, Kitchen, Fam Rm, Library (BR 5) Breakfast, SUN Room, Laundry, 5 Bedrooms, 3 1/2 Bath, SITTING ROOM, 14x18' Deck. (YORKSHIRE II)**

Contractor Company: **TRINITY Homes MARYLAND LLC**
 Contact Person: **Jim Keane**
 Address: **3675 Park Ave**
 City: **FC** State: **MD** Zip Code: **21043**
 License No.: **7646**
 Phone: **443.324-9806**; **410.480.0013**
 Email: **TKeane@TrinityHomes.com**

ccupant/Tenant Name: **N/A**
 /as tenant space previously occupied? Yes No

Engineer/Architect Company: **N/A**

ontact Name: _____
 ddress: _____
 ity: _____ State: _____ Zip Code: _____
 hone: _____ Fax: _____
 Email: _____

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: 66'0" x 54'0"
Area of construction (sq. ft.):	2 nd floor: 66'52" x 54'
Use group:	Basement:
	<input type="checkbox"/> Finished Basement
	<input checked="" 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: 5
<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:
<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other: Fireplace	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: G19000136	
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: *Jim Keane*
 Email Address: **TKeane@TrinityHomes.com**
 Title/Company: **Developer**

Print Name: **Jim Keane**
 Date: **9/27/19**
RECEIVED
SEP 27 2019
LICENSES & PERMITS
DIVISION

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	11/1/19	<i>R. Biegl</i>

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	\$ 100
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# 002027

Maura J. Rossman, M.D., Health Officer

MEMORANDUM

TO: *Tim Keane, Trinity Homes Maryland, LLC*

FROM: *Robert Bricker, REHS/RS, L.E.H.S.*
Well & Septic Program

RE: *13617 Noble Way*, Potential Basement Bedroom

DATE: October 9, 2019

I have reviewed the floor plans in support of Building Permit **B19003290** for a new home at **13617 Noble Way** and noted that there is a rough-in for a full bathroom in the unfinished basement. Please note that this makes it very likely for one or more rooms to be considered bedrooms upon conversion of the basement to finished living space.

For reference, the following is the bedroom definition in Howard County Code Section 3.801(b):

- (1) Except as provided in paragraph (2) of this subsection, a bedroom is any space in the conditioned area of a dwelling unit or accessory structure that:
 - (i) Is 90 square feet or greater in size;
 - (ii) May be used as a private sleeping area; and
 - (iii) Has at least one window and one interior door.
- (2) If a home office, library, or similar room is proposed, it may not be a bedroom if there is no closet; and
 - (i) The room contains permanently built-in bookcases around the perimeter of the room, desks, and other features that encumber the room;
 - (ii) A minimum 4 foot-wide opening, without doors, into another room;
 - (iii) A half wall (4 foot maximum height) between the room and another room; or
 - (iv) The room is a first floor room or basement area that does not have direct access to full bathrooms or "roughed in" plumbing that would provide direct access to future full bathroom facilities.

The Health Department strongly recommends sizing the onsite sewage disposal system at least one bedroom larger than the existing **five (5)**-bedroom design to accommodate a future finished basement. If you choose to only size for the existing design, any future building permit for a finished basement may be placed on hold until the system is upgraded to accommodate the proposed number of bedrooms. This memo will be retained in the Health Department file for future reference.

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

Date: 10/24/19

To: Robert Bucher Health Dept
(Person's Name and Division)

From: Tim Keane, Trinity Homes 443.324-9806
(Your Name, Company Name and Telephone Number)

Subject: Project name Estates at Raven Hill lot 4
Project site address ~~13621, 13617, 13613, 13609,~~
13605, 13601
Permit # B-19003289 SDP # _____
Other information pertinent to this project B19003289, 90, 91, 92, 93 94 Highland

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
- 2 Copies of Plot Plans to Scale (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 _____

Contact Person Information: (Required)

Tim Keane
Please Print Name

Telephone No: 443.324-9806

E-Mail Address: TKeane@TrinityHomes.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 LLP

Maura J. Rossman, M.D., Health Officer

MEMORANDUM

TO: *Tim Keane, Trinity Homes Maryland, LLC*

FROM: *Robert Bricker, REHS/RS, L.E.H.S.*
Well & Septic Program

RE: *13617 Noble Way*, Potential Basement Bedroom

DATE: July 30, 2021

I have reviewed the floor plans in support of house type change to The Hearthstone III under Building Permit **B19003290** for a proposed new home at **13617 Noble Way** and noted that there is a rough-in for a full bathroom in the unfinished basement. Please note that this makes it very likely for one or more rooms to be considered bedrooms upon conversion of the basement to finished living space.

For reference, the following is the bedroom definition in Howard County Code Section 3.801(b):

- (1) Except as provided in paragraph (2) of this subsection, a bedroom is any space in the conditioned area of a dwelling unit or accessory structure that:
 - (i) Is 90 square feet or greater in size;
 - (ii) May be used as a private sleeping area; and
 - (iii) Has at least one window and one interior door.
- (2) If a home office, library, or similar room is proposed, it may not be a bedroom if there is no closet; and
 - (i) The room contains permanently built-in bookcases around the perimeter of the room, desks, and other features that encumber the room;
 - (ii) A minimum 4 foot-wide opening, without doors, into another room;
 - (iii) A half wall (4 foot maximum height) between the room and another room; or
 - (iv) The room is a first floor room or basement area that does not have direct access to full bathrooms or "roughed in" plumbing that would provide direct access to future full bathroom facilities.

The Health Department strongly recommends sizing the onsite sewage disposal system at least one bedroom larger than the existing **five (5)**-bedroom design to accommodate a future finished basement. If you choose to only size for the existing design, any future building permit for a finished basement may be placed on hold until the system is upgraded to accommodate the proposed number of bedrooms. This memo will be retained in the Health Department file for future reference.

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

Date: 7/2/2021

AMENDMENT

To: _____
(Person's Name and Division)

From: _____ (_____) _____
(Your Name, Company Name and Telephone Number)

Subject: Project name TRINITY HOMES

Project site address 13617 NOBLE WAY

Permit # B19003290 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
- Copies of PLOT PLANS (be specific). **HOUSE-TYPE CHANGE**
- 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 _____

Contact Person Information: (Required)

Please Print Name

Telephone No:

E-Mail Address:

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 DROPBOX

CK # 004415
\$50.00

White-Plan Review / Yellow-Applicant / Pink-Permit Division
t:\Operations\Updated forms\transmit.frm - Rev. 04/2014

RECEIVED
JUL 02 2021
LICENSES & PERMITS
DIVISION

AMENDMENT

TRINITY HOMES MARY LAND, LLC
3675 PARK AVENUE
ELLICOTT CITY, MD 21043
443-324-9806

RECEIVED

JUL 02 2021

LICENSES & PERMITS
DIVISION

June 1, 2021

To: Howard County Department of Licenses and Permits

From: Michael Pfau, President
Trinity Homes Mary Land, LLC
3675 Park Avenue
Ellicott City, MD 21043

RE: Revised permit for **B19003290**

Dear sir or madam,

This letter will serve as a request to revise an existing permit for **B19003290**, located at **13617 Noble Way, Highland, MD 20777**, also known as **Estates at River Hill Lot 5**.

The House type changed from a Yorkshire Manor to the following Description of Work:

- SFD,
- Hearthstone III
- 2 story,
- Full Basement, (Unfinished),
- 3-car garage
- 5- Bedrooms
- 5- full baths
- Powder Room
- Dining Room
- Foyer
- Library
- Two (2) Story Family Room
- Kitchen
- Morning Room

- Laundry
- Office

Please find attached the following:

- Three (3) sets of house plans.
- Five (5) sets of Plot Plans
- Accela print-out showing the existing permit has been
- Check for \$50.00

Please call me if you have any questions or need anything else from. Please discard if you have too many copies. With COVID wanted to err on have to many rather than too few.

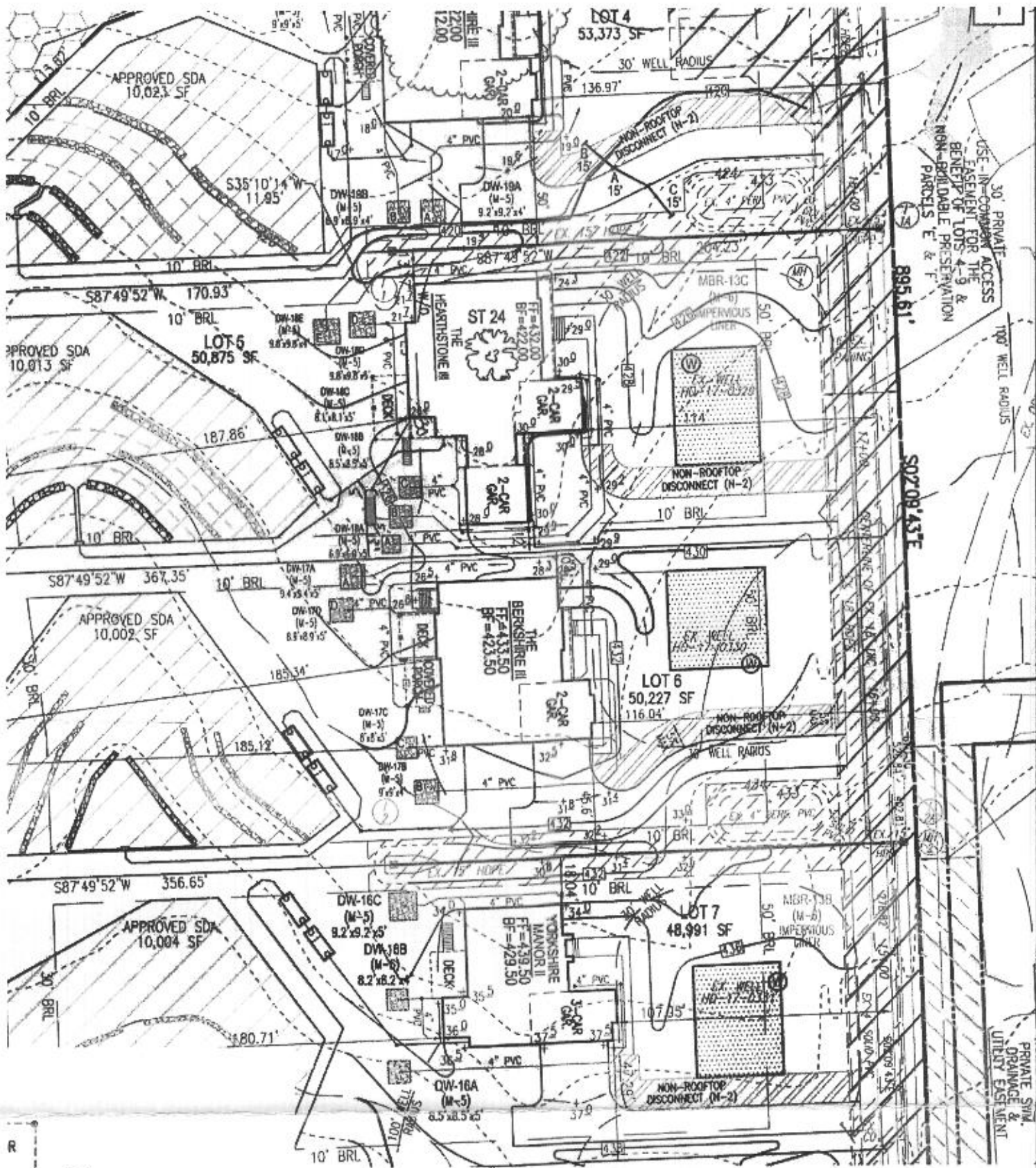
Respectfully,



Tim Keane

tkeane@trinityhomes.com

4433249806



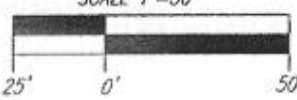
Tank is 5' from driveway, 5' from Septic line - 13' from property line



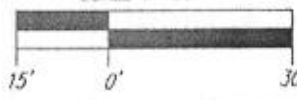
SITE PLAN

SCALE: 1"=50'

SCALE 1"=50'



SCALE 1"=30'



OWNER
 ESTATES AT RIVER HILL, LLC
 MICHAEL PFAU, MEMBER
 3675 PARK AVENUE, SUITE 301
 ELLICOTT CITY, MD 21043
 (410) 480-0023

DEVELOPER
 TRINITY HOMES MARY LAND, LLC
 3675 PARK AVENUE, SUITE 301
 ELLICOTT CITY, MD 21043
 (410) 480-0023

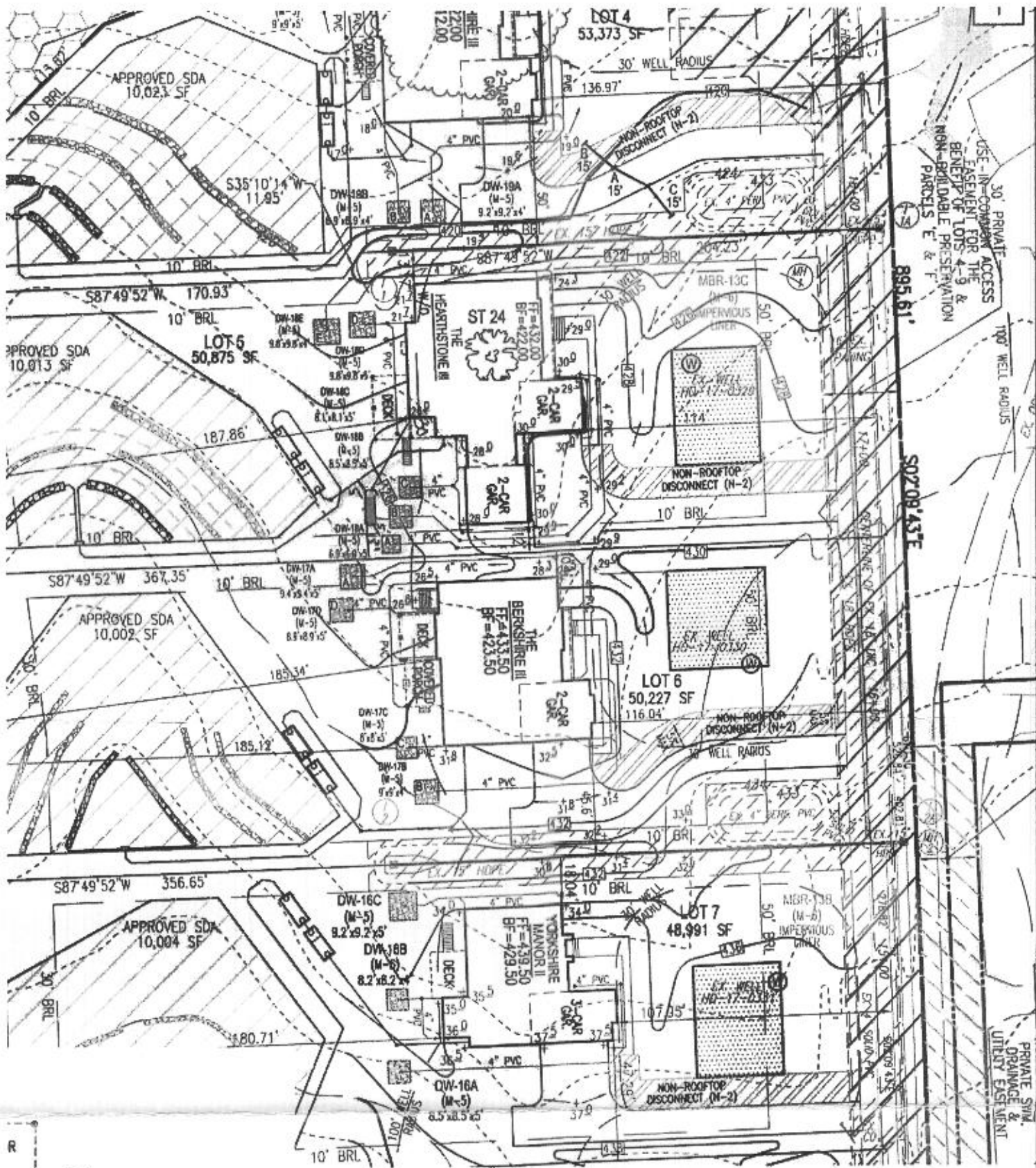
VOGEL ENGINEERING
 ⊕
TIMMONS GROUP
 3380 NORTH RIDGE ROAD, SUITE 110, ELLICOTT CITY, MD 21043
 P: 410.461.7666 F: 410.461.8961 www.timmons.com

PLOT PLAN
THE ESTATES AT RIVER HILL - LOT 5

13617 NOBLE WAY
 HIGHLAND, MD 20777

4
3
2
1
9
8
7
6
5
4
3
2
1
0
5TH ELECTION DISTRICT
 TAX MAP: 34 PARCEL: 389
 DPZ REF'S: ECP-16-064, WP-17-034,
 WP-17-128, SP-17-007, F-18-064

BLOCK: 23
 ZONED: RR-DEO
 HOWARD COUNTY, MARYLAND



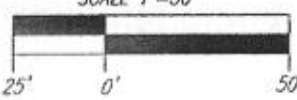
Tank is 5' from driveway, 5' from Septic line - 13' from property line



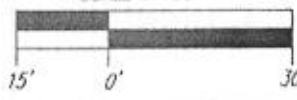
SITE PLAN

SCALE: 1"=50'

SCALE 1"=50'



SCALE 1"=30'



OWNER
 ESTATES AT RIVER HILL, LLC
 MICHAEL PFAU, MEMBER
 3675 PARK AVENUE, SUITE 301
 ELLICOTT CITY, MD 21043
 (410) 480-0023

DEVELOPER
 TRINITY HOMES MARY LAND, LLC
 3675 PARK AVENUE, SUITE 301
 ELLICOTT CITY, MD 21043
 (410) 480-0023

VOGEL ENGINEERING

TIMMONS GROUP

3380 NORTH RIDGE ROAD, SUITE 110, ELLICOTT CITY, MD 21043
 P: 410.461.7666 F: 410.461.8961 www.timmons.com

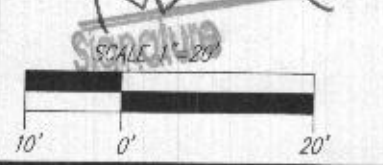
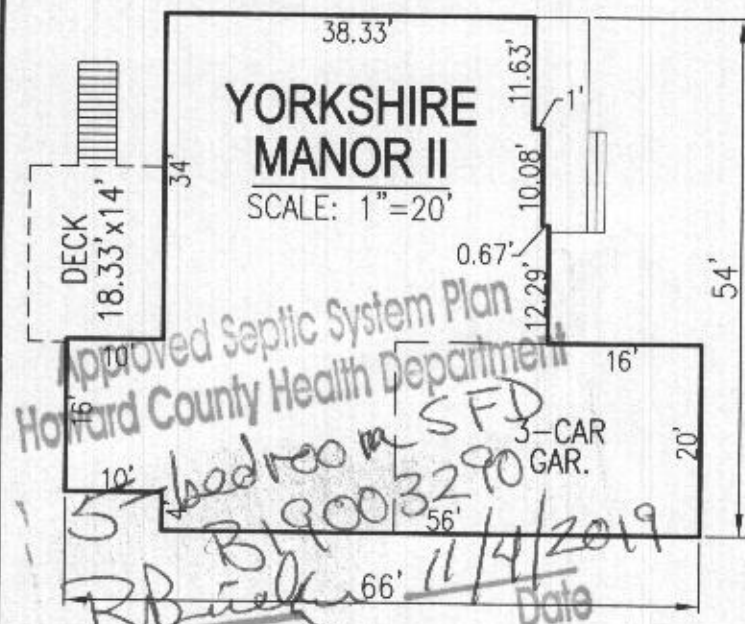
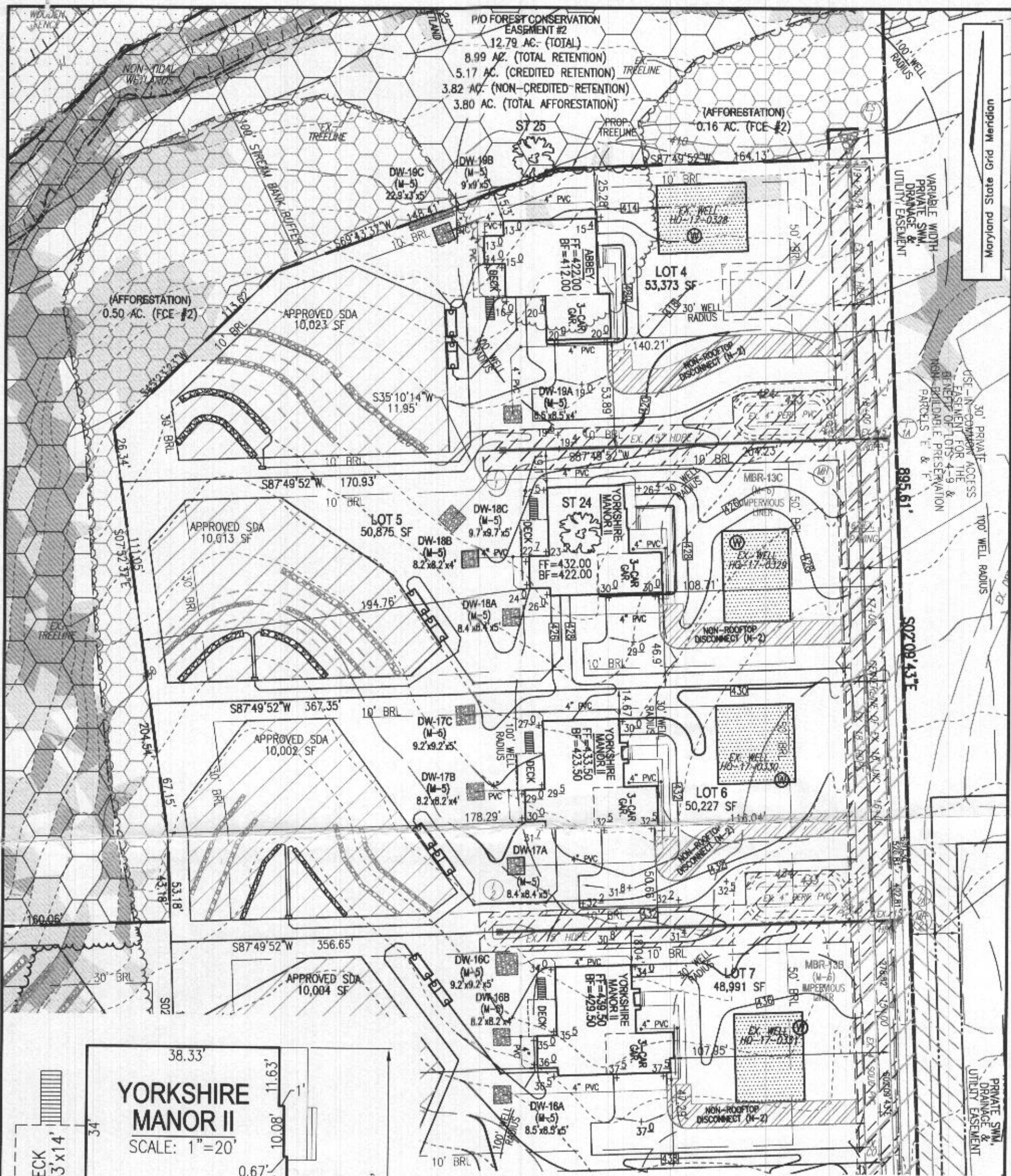
PLOT PLAN

THE ESTATES AT RIVER HILL - LOT 5

13617 NOBLE WAY
 HIGHLAND, MD 20777

4
3
2
1
9
8
7
6
5
4
3
2
1
0
5TH ELECTION DISTRICT
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 WP-17-128, SP-17-007, F-18-064

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 ZONED: RR-DEO
 HOWARD COUNTY, MARYLAND



SCALE	AS SHOWN
DRAWN BY	JMR
CHECKED BY	RHV
DATE	JUNE 19, 2019
W. O. #	15-39
SHEET#	1 OF 2

REVISED Date: 10/24/19
 Comments: TO CONCERN

ROBERT H. VOGEL ENGINEERING, INC.
 ENGINEERS • SURVEYORS • PLANNERS
 3300 N. RIDGE ROAD, SUITE 110 ELLICOTT CITY, MD 21043
 TEL: 410.461.7666 FAX: 410.461.8961

PLOT PLAN
THE ESTATES AT RIVER HILL - LOT 5
 13617 NOBLE WAY
 HIGHLAND, MD 20777

B-19003290

5TH ELECTION DISTRICT
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