

Record Detail * (This section is required.)

| | | |
|---|---------------|-------------|
| Permit Type | Permit Number | Opened Date |
| Building/Residential/Misc/Tanks | B23000034 | 01/06/2023 |
| Description of Work | | |
| SFD/ INSTALL (1) 1000 GALLON UNDERGROUND PROPANE TANK | | |

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

| | | |
|-----------|-------------|--------------|
| Street # | Street Name | Street Type |
| 7044 | COLT | PL |
| Unit Type | Unit # | X Coordinate |
| -Select- | | -77.00451 |
| | | Y Coordinate |
| | | 39.23486 |
| City | State | Zip Code |
| DAYTON | MD | 21036 |
| | Primary | Yes |

1/12/23 - permit on hold - emailed applicant about revising the plan to show the line from the lp tank to the house to prove it will not run through the SDA or too close to the septic tanks. (PW)

Parcel * (This section is required.)

Search Reset Clear Get Address & Owner

| | | | | | | |
|-------------------|--------|-------------|------------|----------------|-----------------|-----------|
| GIS ID * | Parcel | Parcel Area | Land Value | Improved Value | Exemption Value | Plan Area |
| 11060814 | | 0 | 0 | 0 | 0 | RURAL |
| Legal Description | | | | | | |

1/17/23 - Approved revised plan (PW)

[check spelling](#)

| | | | | | | | |
|--|-----------------|---|--------------|-----------------|-----------------|-------|----------|
| Block | Lot | Census Tract | Council Dist | Inspection Dist | Supervisor Dist | Map # | DAP Zone |
| 12 | 36 | 605101 | 5 | | | | |
| Plan Area | State Tax Id | Subdivision Name | | | | | |
| | | Willowshire | | | | | |
| Section | Area | Tax Map | | | | | |
| | | 27 | | | | | |
| Grid | Zoning District | ADC Map | | | | | |
| 27-12 | RR-DEO | 4932-K3 | | | | | |
| SDP No. | Final Plan No. | WP File No. | | | | | |
| | ECP-16-025 | | | | | | |
| Record Plat No. | WS Contract No. | FDP No. | Primary | | | | |
| 25500-2550 | | | 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 | | | | | |
| | 5-01 | <input type="radio"/> Yes <input checked="" type="radio"/> No | | | | | |
| Building No | | | | | | | |

Owner * (This section is required.)

Search Reset Clear

Name *

TOLL MID ATLANTIC LP COMPANY INC.

Address Line 1

250 GIBRALTER ROAD

Address Line 2

Address Line 3

Mail City

HORSHAM

Phone

301-725-3232

E-mail

Mail State

PA

Primary

Yes

Mail Zip Code

19044

Yes

Cell Number Fax Number

Professionals (This section is not required.)

| | | | | |
|-------------------------------------|--------------------------------------|-----------------------|-----------------------------|--|
| License # * 68408 | Business Name HJ POIST | | | |
| License Type * Propane Gs | First Name JEFF | Middle Name | Last Name WISEMAN | |
| Primary Yes | Address Line 1 360 MAIN ST | Address Line 2 | | |
| | City LAUREN | State MD | ZIP Code 20707 | |
| | Phone 1 3017253232 | Phone 2 | Fax | |
| | E-mail JEFF@HJPOIST.COM | | | |

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 * 1000 | Housing Units * 0 | Number of Buildings * 0 | Public Owned No |
| Construction Type --Select-- | | | |

TANK INFORMATION

RESIDENTIAL TANK INFORMATION

| | | | | |
|--|---|--|--|-------------------------------|
| Capital Project-No Fee * <input type="radio"/> Yes <input checked="" type="radio"/> No | Capital Project Number | Fee Exempt * <input type="radio"/> Yes <input checked="" type="radio"/> No | Roadside Tree Project Permit * <input type="radio"/> Yes <input checked="" type="radio"/> No | Roadside Tree Permit # |
| Existing Use * SFD | Number of Tanks Installed * 1 | Number of Tanks Removed * 0 | | |
| Water Supply Private | Sewage Disposal Private | Expiration Date 7/8/2023 | Relocate Existing Tank * 0 | |

PAYMENT INFORMATION

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

Submit Cancel

PERMIT NUMBER: B **22002738**

DATE ACCEPTED:

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
 www.howardcountymd.gov

BUILDING SITE ADDRESS REQUIRED
 Street Address: 7044 Colt Place Unit:
 City: Ellicott City State: MD Zip Code: 21042
 Subdivision/Village/Complex Name: Willow Creek SDP/WP/BA #:
 Lot: 36 Tax Map: Parcel: Grading Permit #:

DESCRIPTION OF WORK REQUIRED
 Existing Use: vacant lot Proposed Use: SFD Estimated Cost: \$ 300,000
 Trade Work to Be Completed (Separate Permits Required): Mechanical (HVACR) Electrical Plumbing None
New 2 Story "Renwick" Craftsman etc Modified with 2 car garage, and finished lower level (Rec Room, Bedroom and Bathroom)

PROPERTY OWNER INFORMATION REQUIRED
 Owner(s) Name(s) (As it appears on tax records): Toll Mid Atlantic Lp. Co. Inc. Contact: Summer Riley Primary Residence: Yes No
 Owner's Street Address: 250 Gibraltar Road
 City: Horsham State: PA Zip Code: 19044
 Phone: 410-872-9105 Email: sriley1@tollbrothers.com

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION
 Business Name: Decatur Building Services Contact Name: Jim Kerwin
 Street Address: PO Box 552
 City: Woodbine State: MD Zip Code: 21797
 Phone: 443-309-7792 Email: jim@decaturbuildingservices.com

CONTRACTOR INFORMATION REQUIRED
 Business Name: Toll Brothers Contact: Summer Riley
 Licensee's Name: Toll Mid Atlantic Lp. Co. Inc. License #: 8220
 Street Address: 6731 Columbia Gateway Drive, Suite 120
 City: Columbia State: MD Zip Code: 21046
 Phone: 410-872-9105 Email: sriley1@tollbrothers.com

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE
 Business Name: Name:
 Street Address:
 City: State: Zip Code:
 Phone: Email:

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: *"Renwick" craftsman etc Modified with 2 car garage and FU*
 # of Bedrooms (SF): 5 # of efficiency units (MF*): # of 1 BR (MF*): # of 2 BR (MF*): # of 3 BR (MF*):
 # Rooms: 10 # Full Baths: 5 # Half Baths: 1 # Fireplaces: 1
 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
 1st Fl Width: 59 1st Fl Depth: 48 2nd Fl Width: 59 2nd Fl Depth: 43 Bsmt Width: 59 Bsmt Depth: 48
 Energy Method: Prescriptive Performance UA Alternative ERI Gross Area: 6704 sq ft Occupiable Area: 6490 sq ft

AGREEMENT/ DISCALIMER 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: *Jim Kerwin* DATE SIGNED: *7/9/2022*

FOR OFFICE USE ONLY CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY
 AGENCIES REQUIRED/APPROVALS:
 / PR _____ / DPZ _____ / DED _____ Hank Oswald Health 9/28/22 / SHA _____ / CID _____
 SUBMITTAL FEES: \$150.00 PAYMENT: TOLL# 00141704 ACCEPTED BY: AKH

Oswald, Hank

From: Summer Riley <sriley1@tollbrothers.com>
Sent: Wednesday, July 27, 2022 9:33 AM
To: Oswald, Hank; 'JIM@DECATURBUILDINGSERVICES.COM'
Cc: Ryan Ketner
Subject: RE: B22002738_7044 Colt Place

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Ryan- Can you please help with this upon your return?

Thank You

Summer Riley
Operations Coordinator, DC Metro/Maryland
Toll Brothers
6731 Columbia Gateway Drive. Ste. 120, Columbia, Maryland 21046

FORTUNE 10TH YEAR ON FORTUNE WORLD'S
WORLD'S MOST MOST ADMIRED COMPANIES LIST
ADMIRED
COMPANIES 2021

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From: Oswald, Hank <hoswald@howardcountymd.gov>
Sent: Wednesday, July 27, 2022 9:31 AM
To: 'JIM@DECATURBUILDINGSERVICES.COM' <JIM@DECATURBUILDINGSERVICES.COM>
Cc: Summer Riley <sriley1@tollbrothers.com>
Subject: B22002738_7044 Colt Place

Hi Jim:

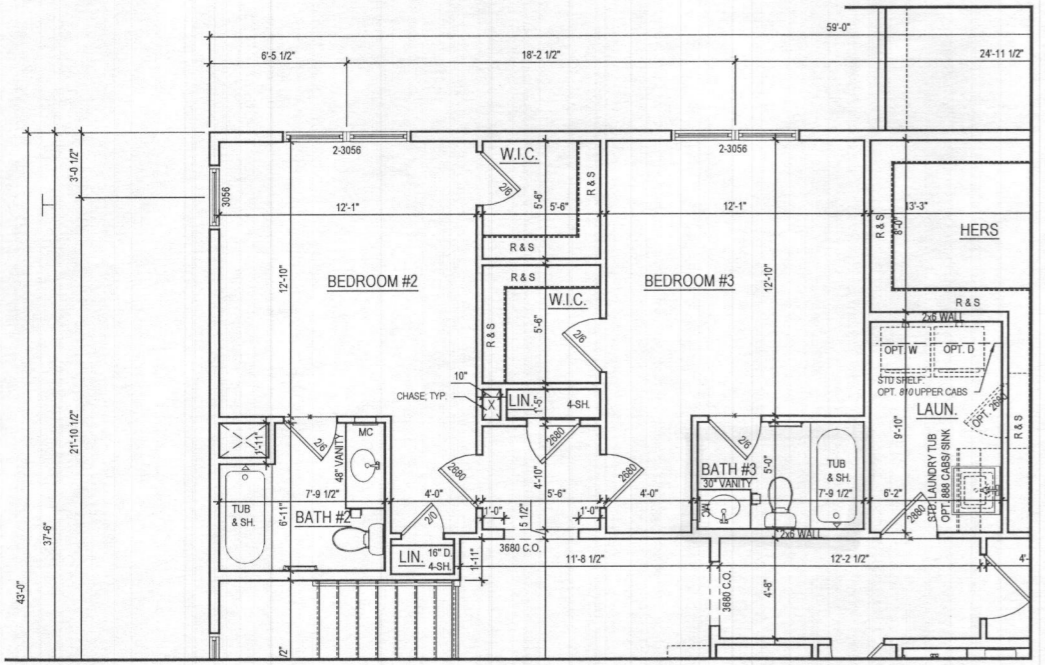
Good morning. I received the building permit and floor plans for 7044 Colt Place. I will also need the OSDS Plan. Please forward at least 2 copies of the OSDS Plan at your earliest convenience.

Thanks,

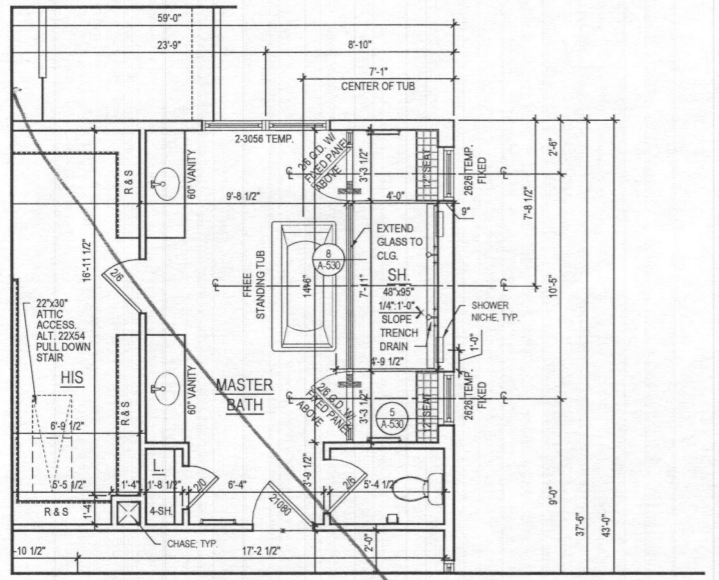
Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Well & Septic Program
410.313.1786
hoswald@howardcountymd.gov

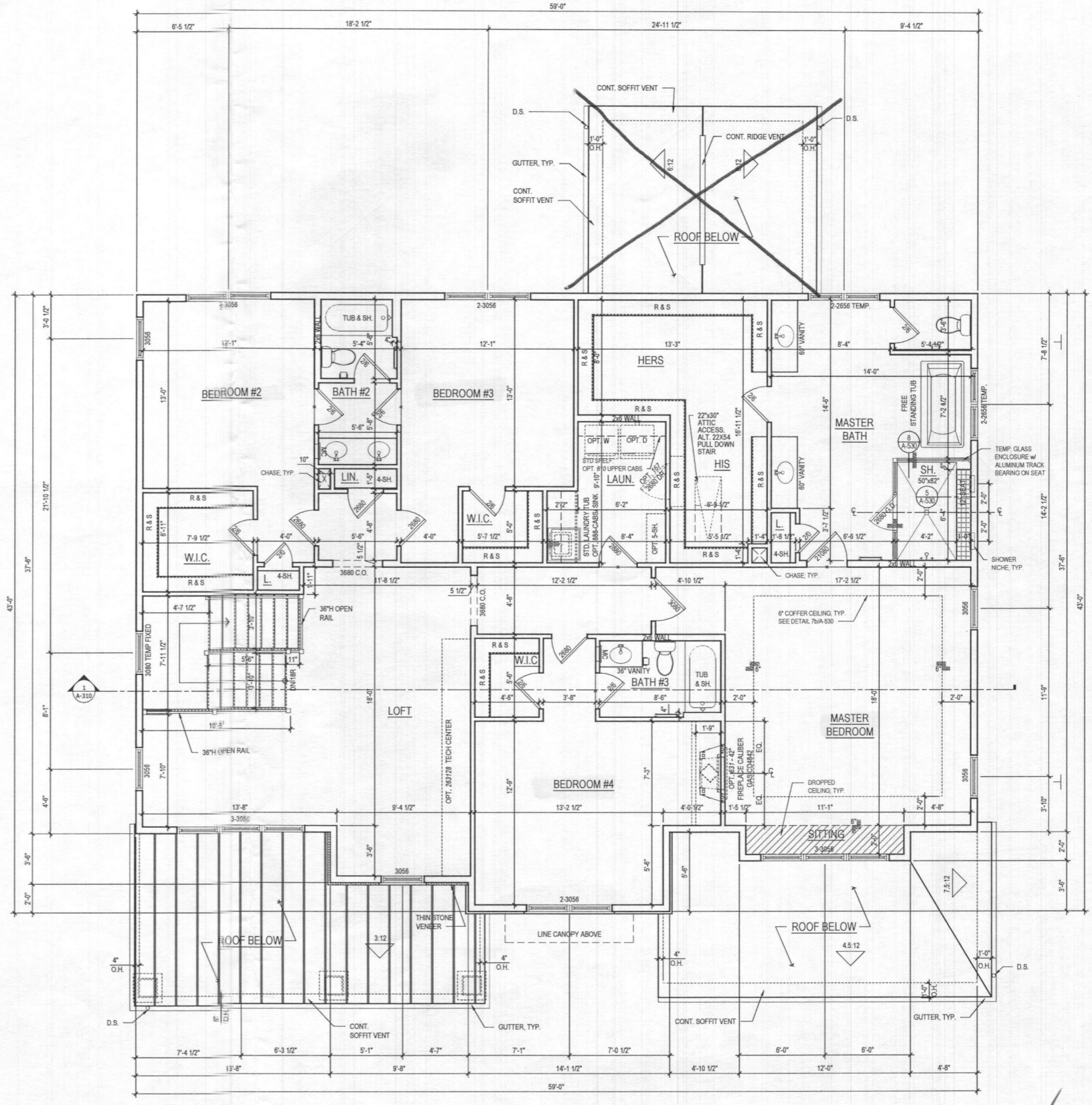
- GENERAL PLAN NOTES**
- A. ALL WOOD STUD PARTITIONS NOT DIMENSIONED ARE TO BE 3 1/2" FOR INTERIOR AND 5 1/2" FOR EXTERIOR WALLS UNLESS OTHERWISE NOTED.
 - B. ALL INTERIOR DIMENSIONS ARE TO FACE OF STUDS.
 - C. ALL EXTERIOR DIMENSIONS ARE TO FACE OF STUDS.
 - D. ALL DIMENSIONS GOVERN OVER SCALE.
 - E. ALL SMOKE DETECTORS ARE TO BE WIRED IN SUCH A MANNER THAT ACTIVATION OF ONE WILL ACTIVATE THEM ALL.
 - F. ENCLOSED ACCESSIBLE SPACE UNDER STAIRS SHALL HAVE WALLS AND SOFFITS PROTECTED ON ENCLOSED SIDE WITH 1/2" GYPSUM BOARD.
 - G. ALL WINDOWS SIZE ARE NOTED IN FEET + INCHES AS MEASURED FROM SASH TO SASH.
 - H. REFER TO ELEVATIONS FOR WINDOW HEAD HEIGHTS.
 - I. ALL DOORS ARE TO BE 6'-8" HIGH UNLESS OTHERWISE NOTED.
 - J. WASHER ALWAYS TO BE ON LEFT SIDE OF DRYER.
 - K. DISHWASHER ALWAYS TO BE ON RIGHT SIDE OF SINK.



2 ALT. SECOND FLOOR PLAN W/ OPT. 367 - BATHROOM #3
 A-120 SCALE: 1/4"=1'-0"
 TOL081A_A120.DWG



3 PART. SECOND FLOOR PLAN w/ OPT. 055 - LUXURY MASTER BATH
 A-120 SCALE: 1/4"=1'-0"
 TOL081A_A120.DWG



1 SECOND FLOOR PLAN @ ELEV. 1 - CRAFTSMAN
 A-120 SCALE: 1/4"=1'-0"
 TOL081A_A120.DWG

ARCHITECT:

8521 Leesburg Pike
 Suite 700 | Vienna, VA 22182
 P: 571.830.1800 | F: 571.830.1801
 www.lessarddesign.com

SEAL & SIGNATURE:

OWNER:

TOLL BROTHERS
 7164 COLUMBIA GATEWAY DRIVE
 COLUMBIA, MD 21046
 P: 410.872.9105
 CONTACT: MARK NOSAL
 mnosal@tollbrothersinc.com

PROJECT NAME:
 WILLOW CREEK
 HOWARD COUNTY, MD

SHEET TITLE:
RENWICK FLOOR PLANS

| ISSUE / REVISION | | |
|------------------|-------------|----------|
| NO. | DESCRIPTION | DATE |
| BID SET | | 08.19.19 |
| PERMIT SET | | 09.16.19 |

PROJECT No: TOL081A
 DRAWN BY: ACB
 CHECKED BY: AP
 PLOT DATE: Sep. 13, 2019
 FILE NAME: TOL081a_A120.dwg

A-120

