

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
00157683

MTR 1/10/06

Building Address 3756 Championship Rd
Glenwood Md 21738
04-361563
Suite/Apt. #: _____ SDP/WP/Petition #: AT #13383
Census Tract 604002 Subdivision SYCAMORE VALLEY II
Section _____ Area _____ Lot 7
Tax Map 21 Parcel 7 Grid 10
Zoning RC-DE Map Coordinates 9B9 Lot size 1.14 ac

Property Owner's Name PATRICK & KATHLEEN WYNN
Address 3756 Championship Rd
City Glenwood State MD Zip Code 21738
Home Phone 410-489-9422 ^{cell} Work Phone 410-218-7474
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use Storage SF Home
Proposed Use Finish Basement for SDP
Estimated Construction Cost \$ 34,000

Contractor Company CRJ Contracting LLC
Contact Person Tom Postier

Description of Work Completion of a finished basement, office, game Area sitting area, media room, bath, Utility Room, storage/closet 1505 sq ft

Address 1508 Springlake Way N
City Sykesville State MD Zip Code 21784
License No. 122081
Phone 410-781-0282 Fax 410-984-5276

Occupant or Tenant Patrick & Kathleen Wynn
Contact Name SAME AS OWNER

Engineer or Architect Company _____
Contact Person N/A

Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
No. of Bedrooms _____	
Height: _____	
Multi-family dwellings: _____	
No. of efficiency units: _____	
No. of 1 BR units: _____	
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof Height: _____	
State Certified Modular _____	
Manufactured Home _____	

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.

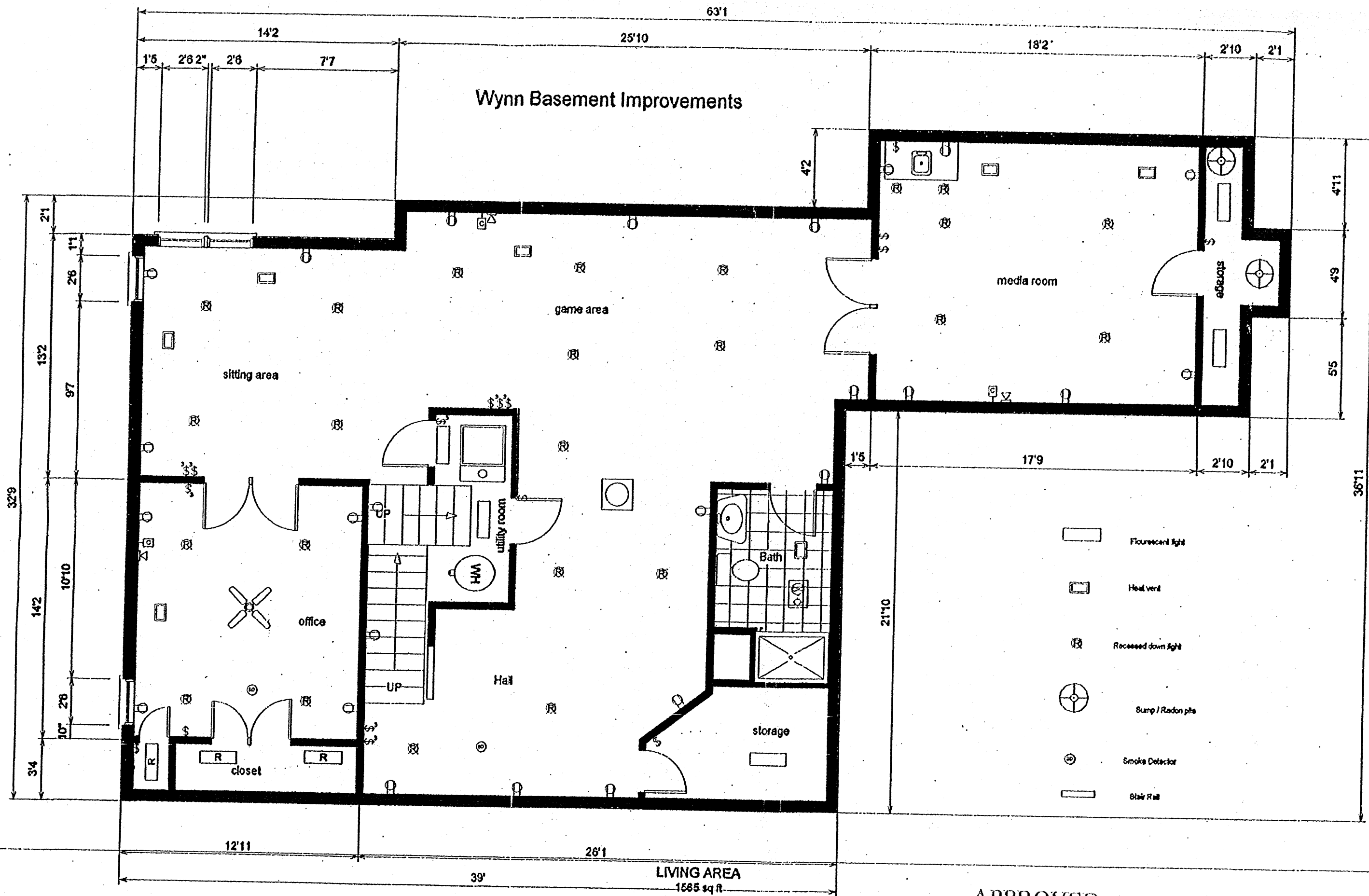
Thomas W Postier
Applicant's Signature
Owner
Title/Company

Thomas W Postier
Print Name
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
FOR OFFICE USE ONLY.

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering DPZ	<u>1/10/06</u>	<u>[Signature]</u>	Side St: _____	Add'l per. fee \$ _____
Health			All minimum setbacks met?	TOTAL FEES \$ _____
Fire/Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies:	White: Building Official	Green: LDD, DPZ	Yellow: DED, DPZ	Pink: Health
T:\Form\PERMIT.FRM				Gold: SHA

36701



WALI
 BP#
 APP. S
 DESC.
 /

APPROVED

WALK-THRU BUILDING PERMIT
 BP# 8001571083 A# 573136
 APP. SAN SFO DATE: 1/10/06
 DESC. OF WORK: Finish
Basement

APPLICATION

HOWARD COUNTY

SERIAL NUMBER

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

B 00112933

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

3671 ~~Championship Drive~~ ^{Sycamore Valley Run}
Glenwood, MD 21191 36701

GRADING/SEDIMENT CONTROL YES NO *67-98-20*
SDP #

DESCRIPTION OF WORK AUTHORIZED
Custom - see attached history - full basement, 4 BD, 2 FB, GYM, 10R, Garage, FP

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
N/A	7	N/A	N/L	10		

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Sycamore Valley II		21	44	(2-1)

OWNER NAME AND ADDRESS: Catonsville Builders Inc, 9025 M Chevrolet Dr, Ellicott City, MD 21043
PHONE NO.: 410-750-1200

OCCUPANT'S NAME AND ADDRESS: Owner
PHONE NO.:

ARCHITECT OR ENGINEER'S NAME AND ADDRESS: Owner
PHONE NO.:

CONTRACTOR'S NAME AND ADDRESS: Owner
PHONE NO.:

EXISTING USE: Vacant lot
PROPOSED USE: SFD

EST. CONSTRUCTION COST: \$150,000
LICENSE NUMBER: _____
PERMIT FEE: _____

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			
FOOTINGS	FOUNDATION	S. WALLS	
10" x 8" poured concrete	3" concrete	red frame brick	

UTILITIES
 WATER/WELL: SEWER/SEPTIC: GAS: NO
 ELECTRICITY: TYPE OF HEAT: ELEC. AC:

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been completed with.

Mark E. Reffkin
SIGNATURE
7/13/98
DATE

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM RW LINE TO FRONT BUILDING LINE _____
 SIDE YARD (DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE) _____
 TO SIDE BUILDING LINE _____
 DISTANCE IN FEET, REAR YD. REQUIRING SET _____
 BACK (CORNER LOT ONLY) _____
 SDP # _____

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING	<input checked="" type="checkbox"/>	
SHA	<input checked="" type="checkbox"/>	
SEDIMENT/GRADING	<input checked="" type="checkbox"/>	
BUILDING OFFICIAL	<input checked="" type="checkbox"/>	
WATER & SEWER		
HEALTH DEPT.	7/30/98	Mark E. Reffkin
FIRE PROTECTION		
STORM WATER MGM	<input checked="" type="checkbox"/>	

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION
 To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
 Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591 H 1-1552

APPROVED _____ DATE _____
 Distribution of Copies:
 White - Building Official
 Green - Planning & Zoning
 Yellow - Engineering
 Pink - Health Dept.
 Gold - S.H.A.

Mark E. Reffkin

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER
BO0136785

Building Address 3756 Champe Wash. Pkwy
Glenwood
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 604002 Subdivision SYCAMORE VALLEY II
Section _____ Area _____ Lot 7
Tax Map 21 Parcel 225 Grid 7
Zoning RC Map Coordinates _____ Lot size _____

Property Owner's Name Patricia Wynn
Address 3756 CHAMPE WASH. PKWY
City GLENWOOD State MD Zip Code 21738
Home Phone 4844422 Work Phone 4102412456
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use SFD
Proposed Use DC
Estimated Construction Cost \$ 10,000
Description of Work CONSTRUCTION OF GARAGE
DECK AND DECKING
24' x 6' x 12' x 10' - 12' x 15' x 10' x 10'

Contractor Company FRANKLIN DECK BLDG.
Contact Person ANDREW MERRZ
Address 1067 HARBOR CI
City ELDENSBURG State MD Zip Code 21784
License No. 51321
Phone 4107817500 Fax _____

Occupant or Tenant WYNNS
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company _____
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: <u>550 SF</u>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ <input checked="" type="checkbox"/> Wood Frame _____ State Certified Modular _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ Multi-family dwellings: _____ No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ State Certified Modular _____ Manufactured Home _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/> Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/> Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____

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 THERE TO; (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 [Signature]
Title/Company _____

Print Name ANDREW MERRZ
Date 6/10/02

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY

AGENCY OF _____ DATE 6-13-02 SIGNATURE APPROVAL Kacie Norman
Land Development - DPZ _____
State Highways _____
Building Official _____
Dev. Engineering, DPZ _____
Health _____
Fire Protection _____
Is Sediment Control approval required prior to issuance?
YES NO
CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met? YES NO
Is Entrance Permit required? YES NO
Historic District? YES NO
Lot Coverage for NewTown Zone _____
SDP/Red-line approval date _____

PROPERTY ID# 36701
Filing fee \$ _____
Permit fee \$ _____
Excise tax \$ _____
Add'l per. fee \$ _____
TOTAL FEES \$ _____
Sub-total paid \$ _____
Balance due \$ _____
Check # 4091
Validation # 53257
Accepted by _____

PATRICK WYNN

$U 32^{\circ}03'56'' E$

125.00'

30' BRL

Septic

180.81'

266.61'

7,519

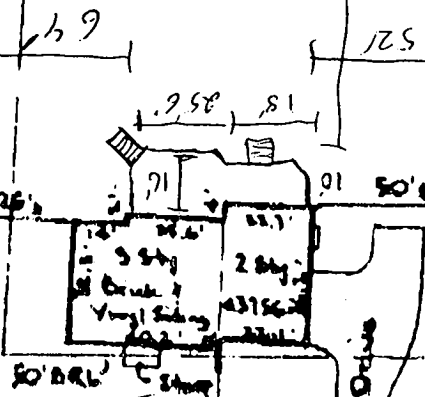
Lot 7

Lot 8

KN 6-13-02

deck > 10' to
Septic tank.
Well not an
issue
> 20' to
basement

18' 22.45' 20'



64' 00' 26" E

well location

10' Public Tree Maintenance Basement

$S 72^{\circ}59'33'' W$ 141.97'

Edge Mac

50' R/W

CHAMPIONSHIP DRIVE

23' & Mac Paving

35
16
150
250

THE LOT SHOWN HEREON IS IN FLOOD ZONE C PER F.E.M.A. FLOOD INSURANCE RATE MAP PANEL # 240004-0020B

The plat is of benefit to consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing, or refinancing. The plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements. The plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing. The plat contains a tolerance of accuracy of two feet, more or less.



Ertel Associates, Inc.

3109 Moreland Avenue
Baltimore, Maryland 21234
Phone: 410-882-0989 • Fax: 410-882-0842

LOCATION DRAWING
#3756 CHAMPIONSHIP DRIVE; LOT 7
SYCAMORE VALLEY II, LOTS 1 THRU 17, PARCEL A/C
HOWARD CO., MD. PLAT MDR 13383

DATE: 4/8/01 SCALE: 1"=50' FILE:

made to cont

Building Address <u>3671 Sycamore Valley Run</u> <u>Glenwood, MD 21797</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>6410</u> Subdivision <u>suburban propane</u> Section _____ Area <u>119</u> Lot _____ Tax Map <u>21</u> Parcel <u>7</u> Grid <u>16</u> Zoning <u>RC-10</u> Map Coordinates _____ Lot size _____	Owner's Name <u>Catonsville Builders</u> Address <u>9025 m Chevrolet Drive</u> City <u>Ellicott City</u> State <u>MD</u> Zip Code <u>21042</u> Home Phone _____ Work Phone <u>410 750 1200</u> Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____
--	--

Existing Use <u>Single Family Dwelling</u> Proposed Use <u>Propane Tank</u> Estimated Construction Cost \$ <u>3200.00</u> Description of Work <u>Bury 1,000 Gallon</u> <u>Underground Propane Tank</u>	Contractor Company <u>Suburban Propane</u> Contact Person <u>Mike DeVincent</u> Address <u>31 Derwood Circle</u> City <u>Rockville</u> State <u>MD</u> Zip Code <u>20850</u> License No. _____ Phone <u>301 251 0606</u> Fax <u>301 251 0608</u>
--	---

Occupant or Tenant <u>Catonsville Builders</u> Contact Name _____ Address <u>9025 m Chevrolet Drive</u> City <u>Ellicott City</u> State <u>MD</u> Zip Code <u>21042</u> Phone <u>410 750 1200</u> Fax <u>410 750 2596</u>	Engineer or Architect Company <u>N/A</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
---	---

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13 <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth Width 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other: _____ Dimensions: _____ Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____

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 THEREIN; (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.

Michael DeVincent Michael DeVincent
 Applicant's Signature Print Name
Residential Energy Rep/Suburban Propane 10-21-98
 Title/Company Date

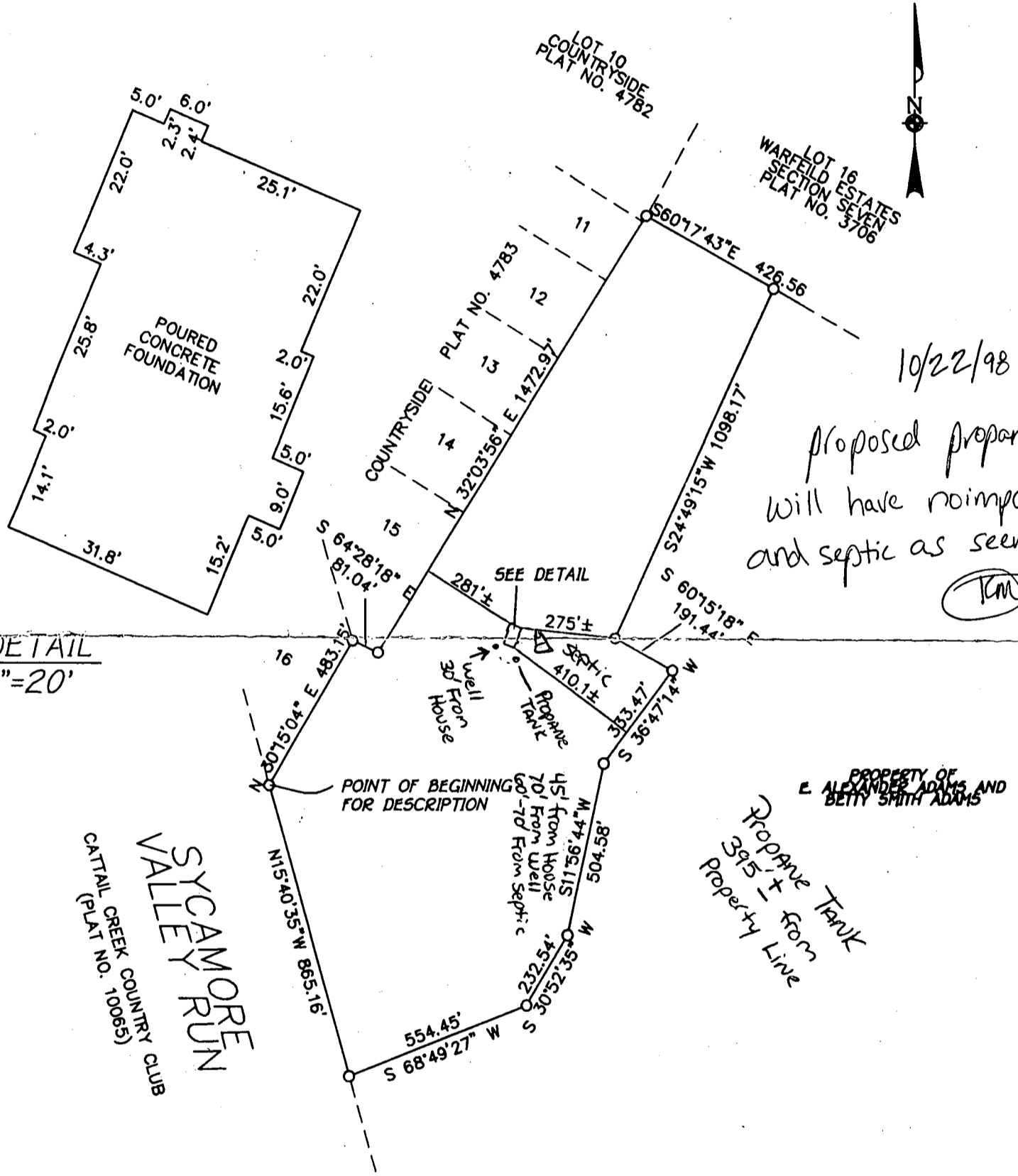
VALIDATION

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY **

AGENCY <input checked="" type="checkbox"/> Land Development, DPZ <input type="checkbox"/> State Highways <input checked="" type="checkbox"/> Building Official <input checked="" type="checkbox"/> Dev. Engineering, DPZ <input checked="" type="checkbox"/> Health <input type="checkbox"/> Fire Protection Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>	DATE <u>10/23/98</u>	SIGNATURE APPROVAL <u>Kimberly Maude</u>	DPZ SETBACK INFORMATION Front: _____ Rear: _____ Side: _____ Side St.: _____ All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> Lot Coverage for NewTown Zone _____ SDP/Red-line approval date _____	PROPERTY ID#: <u>36701</u> Filing Fee \$ _____ Permit Fee \$ _____ (.10 sq. ft. <input type="checkbox"/> (.15 sq. ft. <input type="checkbox"/> Excise Tax \$ _____ (.40 sq. ft. <input type="checkbox"/> (.80 sq. ft. <input type="checkbox"/> TOTAL FEES Check # <u>1615191</u> Validation # _____ Accepted by: _____
---	--------------------------------	--	---	---

GENERAL NOTES:

- 1) THIS PLAT 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 RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT 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 PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE "C" ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 240044 0020 B, EFFECTIVE DATE: DEC. 4, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF 5' PLUS OR MINUS (±).



DETAIL
1"=20'

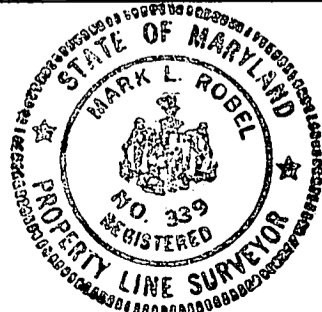
FIRST FLOOR ELEV. = 546.9±

PARCEL 7
SYCAMORE VALLEY 2
HOWARD COUNTY, MARYLAND
4th ELECTION DISTRICT
DEED REF. 4346/662

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLCOTT CITY, MARYLAND 21042
(410) 461 - 2895

FCC •



Mark L. Robel 8/31/98
PROFESSIONAL LAND SURVEYOR DATE
REG. • 339

**HOUSE LOCATION
DRAWING**

FOUNDATION LOCATION: 8/24/98
FINAL LOCATION: _____
BOUNDARY SURVEY: _____

SCALE: 1"=400'
DATE: 8/31/98
DRAWN BY: T.P.F.
CHECKED BY: M.R.L.
PROJECT No.: 61269

E 397475.235
(METRIC)
E 1304050
N 17785.115
(METRIC)
N 58350

LOT 13
COUNTRYSIDE
PLAT No. 4783

LOT 14
COUNTRYSIDE
PLAT No. 4783

LOT 13
COUNTRYSIDE
PLAT No. 4783

6" Concrete Monument
Found (Held for Line)

3/4" ϕ Iron Pipe
Found (0.28' off Title Line)

MATCH LINE SEE SHEET 2

72

LOT 7
49,827 Sq.Ft.

LOT 8
45,839 Sq.Ft.

LOT 9
40,127 Sq.Ft.

LOT 10
44,922 Sq.Ft.

LOT 11
46,097 Sq.Ft.

LOT 12
52,778 Sq.Ft.

CHAMPIONSHIP
DRIVE

10' Wide Public
Tree Maintenance
Easement
B.R.L.

10' Wide Public
Tree Maintenance
Easement

24' Wide Private
Use-In-common
Driveway Access
Easement For The
Benefit Of Lots 11
And 12. Maintenance
Agreement Recorded
Among The Land
Records Of Howard
County, Maryland

24' Wide Private Use-In-
common Driveway Access
Easement For The
Benefit Of Lots 11, 12, 11
And 12. Maintenance
Agreement Recorded
Among The Land Records
Of Howard County, Maryland

N69°00'27"W
50.00'

163

552

270

540

541

274

276

R=25.00'
L=32.18'

R=100.00'
L=40.27'

R=50.00'
L=12.04'

R=50.00'
L=12.34'

R=50.00'
L=14.15'

R=50.00'
L=21.69'

R=50.00'
L=83.58'

R=50.00'
L=106.58'

R=50.00'
L=187.59'

F 98.89

8
0
0
1
9
9.225 Ac.
0.000 Ac.
0.000 Ac.
5.090 Ac.
14.315

PROPERTY
OF
E. ALEXANDER
AND BETTY SMITH
L-4032, E.

Non-Buildable
Preservation
Parcel "D"

602

601

LOT 15
COUNTRYSIDE
PLAT No. 4783

LOT 14
COUNTRYSIDE
PLAT No. 4783

LOT 15
COUNTRYSIDE
PLAT No. 4783

18" ϕ Hickory Tree
with Old Wire Found
36" ϕ Cherry Tree
with Old Wire Found
Approximate Location of Area
being Mowed by Adjoining
Property Owner

6" Concrete Monument
Found (Held for Line)

3/4" ϕ Iron Pipe
Found (0.28' off Title Line)
N 32°03'56" E

24' Use-In-Common
Access Easement For
The Benefit Of Lots 11 & 12

58,429 Sq.Ft.

LOT 7
49,826 Sq.Ft.

LOT 8
45,839 Sq.Ft.

LOT 9
40,127 Sq.Ft.

LOT 10
44,778 Sq.Ft.

LOT 11
46,114 Sq.Ft.

LOT 12
52,807 Sq.Ft.

LOT 5
0,470 Sq.Ft.

LOT 6
49,941 Sq.Ft.

ROAD 'A'

STORM DRAIN
DRAINAGE AREA
LIMIT

ChB2

525°02'

