

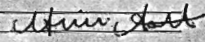
DEPT. OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		<b>HOWARD COUNTY</b> <b>PERMIT APPLICATION</b>		B08003566 <b>PERMIT NUMBER</b>	
Building Address <u>11833 Chapel Estates Drive</u> <u>Clarksville, MD 21029</u>		Property Owner's Name <u>Shoridan Phillips</u> Address <u>11833 Chapel Estates Drive</u> City <u>Clarksville</u> State <u>MD</u> Zip Code <u>21029</u> Phone _____ Phone <u>410-531-1842</u> Applicant's Name & Mailing Address, (if other than stated herein): _____			
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision <u>Chapel Wood II</u> Section _____ Area _____ Lot <u>26</u> Tax Map <u>29</u> Parcel _____ Grid <u>23</u> Zoning <u>RC-DEO</u> Map Coordinates _____ Lot Size _____		Contractor Company <u>The Home Medic Handyman's LLC</u> Contact Person <u>Albert Stokes</u> 410 320 1123 Address <u>3501 Hempel Rd</u> City <u>New Windsor</u> State <u>MD</u> Zip Code <u>21776</u> License No. <u>123440</u> Phone <u>410 954 3144</u> Fax _____			
Existing Use <u>SFO</u> Proposed Use _____ Estimated Construction Cost \$ <u>15,000.00</u> Description of Work <u>DECK / 512 sq. ft.</u> <u>22 x 38 Inlay Stairs</u> <u>w/5 ft.4</u>		Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____			
Occupant or Tenant _____ 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	
<b>Building Characteristics</b> 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	<b>Utilities</b> 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: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads	<b>Building Characteristics</b> SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 <sup>st</sup> floor: _____ 2 <sup>nd</sup> floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <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 Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	<b>Utilities</b> Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input checked="" 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: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <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 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 \_\_\_\_\_  
 Title/Company \_\_\_\_\_  
  
 Dairen Hutton  
 Print Name \_\_\_\_\_  
 12/11/08  
 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 Officials				Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ				Side St.: _____	Add'l per fee \$ _____
Health	12/11/08			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Fire Protection				Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>				Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>				Lot Coverage for New Town Zone _____	Check # <u>CP-11</u>
ONE STOP SHOP: <input type="checkbox"/>				SDP/Red-line approval date _____	Validation # _____
Distribution of Copies - White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA				Accepted by _____	
T: forms/buildingpermitapplication				REV 10/28/04	

Reviewed for:            S.C.D.  
 and sealed Technical Requirements  
 by:                    S.C.D.  
 Date:            /            /             
 THIS DEVELOPMENT PLAN IS APPROVED  
 CONDITIONALLY FOR THE PROPOSED  
 CONSTRUCTION OF THE  
 CONSTRUCTION OF THE

PERCOLATION TEST TABLE

TEST HOLE NO.	PASS/FAIL
1	PASS
2	PASS
3	PASS
4	PASS
5	PASS
6	PASS
7	PASS

DRY WELL SCHEDULE

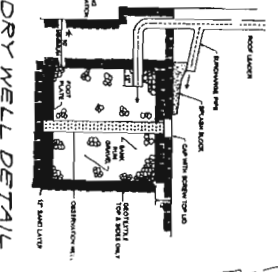
NO.	AREA VOL. REQ. CU YD.	DEPTH	DIAMETER	BOTTOM ELEV.
A	500	5'	5"	388.5
B	500	5'	5"	388.5
C	500	5'	5"	388.5
D	500	5'	5"	388.5
E	500	5'	5"	388.5
F	500	5'	5"	388.0
G	500	5'	5"	388.0
H	500	5'	5"	388.5
I	500	5'	5"	388.5
J	500	5'	5"	388.5

CHAPEL WOODS SECTION 2, AREA 3

LOT 25  
 JARED S. FAST,  
 ROBIN L. FAST  
 PLAT NO. 7934

LOT 26  
 3.034 AC.  
 INSTALL SOLRYA P/IN  
 T/C. 30-008 D/D

LOT 26  
 SCOTT W. MILLER  
 DIANE M. MILLER T/E  
 PLAT NO. 7934



DRY WELL DETAIL

LOT 19  
 LOUIS A. RENBAUM  
 LAURA C. RENBAUM  
 PLAT NO. 9004

LOT 27  
 KAREN E. SANTIUCI

LOT 28  
 JAMES W. SANTIUCI

LOT 29  
 JAMES W. SANTIUCI

LOT 30  
 JAMES W. SANTIUCI

LOT 31  
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LOT 32  
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LOT 55  
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LOT 56  
 JAMES W. SANTIUCI

CLARK · FINEPROCK & SACKETT, INC  
 ENGINEERS · PLANNERS · SURVEYORS

SINGLE FAMILY DETACHED  
 SITE DEVELOPMENT PLAN AND  
 SEWING AND ENDSIDE PLAN  
 CHAPEL WOODS II

INSTALL 450' #2AL PRIMARY + 50' SLACK + 500'

OWNER: SHERIDAN PHILLIPS, 13439 CHAS WALK COURT, HIGHLAND, MARYLAND 20777

ELECTRIC SERVICE INFO:  
 INSTALL 180AL (MCHL # 23-15V) 185' + 50' SLACK + 235' X 2 = 470'

GA5 SERVICE INFO:  
 INSTALL 1/4" P.C. HP. (MCHL W/D - 80L) 230'

PRIMEY CABLE

NOTES

1. ALL MAINTENANCE DISTANCE: VIEW TRENCHES AROUND TREES IN FRONT YARD.

2. PROVIDER: WIDE TRANSMISSION WILL HAVE TRANSDUCER STRAPPED KEEPING OUT OF DRIVE R/W AND HIS SEPTIC A ALSO NO MORE THAN 30' FROM DRY WELL

3. USE CAUTION WHEN CLEANING NEAR AC GAS LINE.

CONSTRUCTION NOTES:  
 1. MAINTAIN 15'-30' DISTANCE: VIEW TRENCHES AROUND TREES IN FRONT YARD.

2. PROVIDER: WIDE TRANSMISSION WILL HAVE TRANSDUCER STRAPPED KEEPING OUT OF DRIVE R/W AND HIS SEPTIC A ALSO NO MORE THAN 30' FROM DRY WELL

3. USE CAUTION WHEN CLEANING NEAR AC GAS LINE.

4. MAINTAIN 15'-30' DISTANCE: VIEW TRENCHES AROUND TREES IN FRONT YARD.

5. PROVIDER: WIDE TRANSMISSION WILL HAVE TRANSDUCER STRAPPED KEEPING OUT OF DRIVE R/W AND HIS SEPTIC A ALSO NO MORE THAN 30' FROM DRY WELL

6. USE CAUTION WHEN CLEANING NEAR AC GAS LINE.

7. MAINTAIN 15'-30' DISTANCE: VIEW TRENCHES AROUND TREES IN FRONT YARD.

8. PROVIDER: WIDE TRANSMISSION WILL HAVE TRANSDUCER STRAPPED KEEPING OUT OF DRIVE R/W AND HIS SEPTIC A ALSO NO MORE THAN 30' FROM DRY WELL

9. USE CAUTION WHEN CLEANING NEAR AC GAS LINE.

10. MAINTAIN 15'-30' DISTANCE: VIEW TRENCHES AROUND TREES IN FRONT YARD.