

1311002959

Building Address: 13916 Ryan Dr Glendg md 21737

Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_

Census Tract: \_\_\_\_\_ Subdivision: Hopkins Choice

Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 29

Tax Map: 21 Parcel: \_\_\_\_\_ Grid: 12

Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 40327#

Existing Use: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Estimated Construction Cost: \$ 8000

Description of Work: Install a 1000 gal inground propane tank

Occupant or Tenant: \_\_\_\_\_

Was tenant space previously occupied? ☐ Yes ☐ No

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

BUILDING DESCRIPTION - COMMERCIAL	
<b>Building Characteristics</b>	<b>Utilities</b>
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #	No. of Heads:

Property Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Contractor Company: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

License No. : \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Engineer/Architect Company: \_\_\_\_\_

Responsible Design Prof.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

BUILDING DESCRIPTION - RESIDENTIAL	
<b>Building Characteristics</b>	<b>Utilities</b>
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 <sup>st</sup> floor:	<input type="checkbox"/> Private
2 <sup>nd</sup> floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	Roadside Tree Project Permit #
<input type="checkbox"/> 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.

Applicant's Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Email Address \_\_\_\_\_ Date \_\_\_\_\_

Title/Company \_\_\_\_\_

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	<u>10-17-11</u>	<u>Heidi Sost</u>
Fire Protection		

Is Sediment Control approval required for issuance? ☐ Yes ☐ No  
☐ CONTINGENCY CONSTRUCTION START  
☐ ONE STOP SHOP

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	\$
Permit Fee	\$ <u>100.00</u>
Tech Fee	\$ <u>10.00</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

B11002959  
LP tank OK  
H8 10-17-11

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT  
FOR HOPKINS CHOICE PLAT NO 12903 REFER TO THIS  
PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS

BASIMEN® DOES NOT LOWER B<sub>12</sub> LEVELS

[illegible]

PERMIT FLOT PLAN  
LOT #29  
**HOPKINS CHOICE**  
JEBEN 04504 F.O. 0-0437  
PLAN No. 12903  
FOURTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND



FILE 2975-107-29 PD  
DRAWN MJB



TYPE HAMPTON (COL)-  
WALK OUT BASEMENT!  
ADD 1/2 TO BASEMENT!  
TRADITIONAL 1/2  
EXPANDED FAMILY ROOM  
BRICK FRONT STOOP  
12" WIDE CONSERVATORY ELITE  
NAPLES SUN ROOM

OPTION No	637
OPTION No	670
OPTION No	633
OPTION No	623
OPTION No	663
OPTION No	263021
OPTION No	529

Permits: 410-313-2455  
Inspections: 410-313-1810  
Automated Line: 410-313-3800

Howard County Building/Fire Permit Application  
Department of Inspections, Licenses & Permits  
3430 Court House Drive  
Ellicott City, MD 21113

Permit Number:

Walk - ~~THRU~~ Thru

Building Address: 13916 RYAN DR.  
Glenn LG MD 21737

Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_

Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_

Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_

Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: House

Proposed Use: House w/ Rm Deck

Estimated Construction Cost: \$ 5,000

Description of Work: Construct an open deck on rear of single fam. dwelling (458 sq. ft.) w/ steps to grade.

Occupant or Tenant: see owner

Was tenant space previously occupied? ☐ Yes ☒ No

Contact Name: See owner

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Property Owner's Name: Toll MD II Ltd. Partnership

Address: 19715 Belmont Executive PLZ, Suite

City: Asburn State: VA Zip Code: 20147

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated herein):  
Vicky Meyer

Phone: 410-296-6900 Fax: 410-296-7992

Email: MDbldepermits@comcast.net

Contractor Company: Toll MD II Ltd. Partnership

Contact Person: Mike Martin

Address: 7164 Columbia Gateway DR.

City: Columbia State: MD Zip Code: 21046

License No.: 678 Cell: \_\_\_\_\_

Phone: 410-320-0223 Fax: \_\_\_\_\_

Email: CR 410-489-2676

Engineer/Architect Company: \_\_\_\_\_

Responsible Design Prof.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 <sup>st</sup> floor:	<input checked="" type="checkbox"/> Private
2 <sup>nd</sup> floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> 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 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: Vicky Meyer Print Name: Vicky Meyer

Email Address: MDbldepermits@comcast.net Date: 10/12/2011

Title/Company: Agent, MD Bldg. Permits, Inc

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	10-12-11	Reid Scott
Fire Protection		

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 New Town Zone: \_\_\_\_\_

SDP/Red-line approval date: \_\_\_\_\_

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

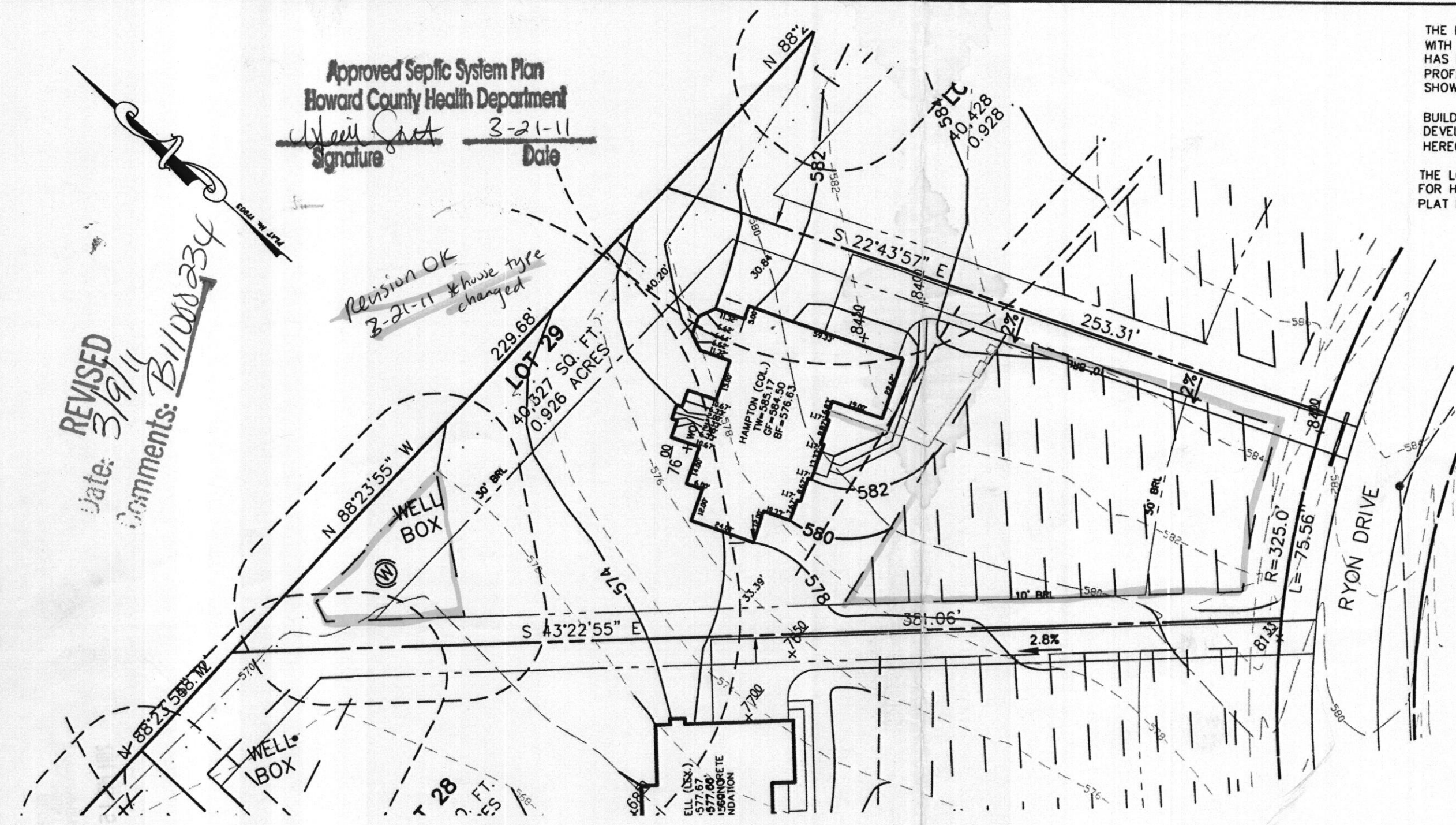


Approved Septic System Plan  
Howard County Health Department

*Michael Scott*  
Signature  
3-21-11  
Date

REVISED  
Date: 3/9/11  
Comments: Bill 00234

Revision OK  
3-21-11 \*house type changed



THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER(HO-94-4113)) HAS BEEN FIELD LOCATED BY ESE CONSULTANTS, INC.- PROFESSIONAL LAND SURVEYOR(S), AND IS ACCURATELY SHOWN.

BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER SITE DEVELOPEMENT PLAN SETBACK DISTANCES SHOWN HEREON AS "±" HAVE AN ACCURACY OF ±0.1' FOOT.

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR HOPKINS CHOICE, PLAT No 17903. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

INV. AT HOUSE	582.10
GRD. AT INV. AT HOUSE	584.5
INV. IN TANK	580.7
INV. OUT TANK	580.4
TOP OF TANK	581.4
GROUND OVER TANK	583.5

INV. IN DIST. BOX	580.3
INV. OUT DIST. BOX	580.0
GROUND AT BOX	584.0

BASEMENT DOES NOT SEWER BY GRAVITY

DRIVEWAY CULVERT TO BE INSTALLED PER PLAN F-05-29

GRADING AND SEC PER GRADING PLAN GR 10-74

SWM PER FINAL PLAN F 05-29

ADDRESS: 13916 RYON DRIVE  
GLENELG, MD 21737

ESE

Land Planning  
Engineering  
Land Surveying

ESE Consultants Inc.  
7164 Columbia Gateway Dr.  
Suite 203  
Columbia, MD 21046  
TEL: 410-872-9105  
FAX: 410-872-4870

TYPE: HAMPTON (COL.)-  
WALK OUT BASEMENT  
ADD 1' TO BASEMENT  
TRADITIONAL FP  
EXPANDED FAMILY ROOM  
BRICK FRONT STOOP  
12' WIDE CONSERVATORY ELITE  
NAPLES SUN ROOM

- OPTION No. 017
- OPTION No. 070
- OPTION No. 633
- OPTION No. 023
- OPTION No. 663
- OPTION No. 263021
- OPTION No. 529



DATE: 11/02/10  
CHK'D: MJB

SCALE: 1"=40'  
JOB#: 2975

FILE: 2975\_LOT\_29 PP  
DRAWN: MJB

PERMIT PLOT PLAN  
LOT #29  
**HOPKINS CHOICE**  
LIBER 07504, FOLIO 0437  
PLAT No. 17903  
FOURTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND



Permits: 410-313-2455  
Inspections: 410-313-1810  
Automated Line: 410-313-3800

Howard County Building/Fire Permit Application  
Department of Inspections, Licenses & Permits  
3430 Court House Drive  
Ellicott City, MD 21043

Permit Number:

B11000234

Building Address: 13916 Ryan Drive  
Glenelg, MD 21737

Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_

Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 39

Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_

Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: Vacant Lot

Proposed Use: Single Family dwelling

Estimated Construction Cost: \$ 400,000

Description of Work: Two story single family dwelling

Occupant or Tenant: \_\_\_\_\_

Was tenant space previously occupied? ☐ Yes ☐ No

Contact Name: Michael Martin

Address: 14112 Patterson Farm Court

City: Glenelg State: MD Zip Code: 21737

Phone: 410-431-7407 Fax: 410-431-2676

Email: MMartin@TollBrothers.com

**BUILDING DESCRIPTION - COMMERCIAL**

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

Property Owner's Name: Toll Brothers, Inc.

Address: 14112 Patterson Farm Court

City: Glenelg State: MD Zip Code: 21737

Home Phone: 410-431-7407 Work Phone: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Contractor Company: Toll Brothers, Inc.

Contact Person: Mike Martin

Address: 7164 Columbia Gateway Drive

City: Columbia State: MD Zip Code: 21043

License No.: \_\_\_\_\_

Phone: 410-431-7407 Fax: 410-431-2676

Email: \_\_\_\_\_

Engineer/Architect Company: ESIE

Responsible Design Prof.: Mike Bryce

Address: 7164 Columbia Gateway Drive

City: Columbia State: MD Zip Code: 21043

Phone: 410-431-7407 Fax: 410-431-2676

Email: \_\_\_\_\_

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 <sup>st</sup> floor: <u>41.6</u> <u>12</u>	<input checked="" type="checkbox"/> Private
2 <sup>nd</sup> floor: <u>41.2</u> <u>6.2</u>	<u>Sewage Disposal</u>
Basement: <u>24.6</u> <u>6.2</u>	<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms: <u>4</u>	<input checked="" type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input checked="" type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	
Roof:	
<input type="checkbox"/> State Certified Modular	
<input type="checkbox"/> 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.

Applicant's Signature

Print Name

Email Address

Date

Title/Company

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	<u>2/21/10</u>	<u>Michael Martin</u>
Fire Protection		

Is Sediment Control approval required for issuance? ☒ Yes ☐ No

☐ CONTINGENCY CONSTRUCTION START

☐ ONE STOP SHOP

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	\$ <u>150.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

REVISED

Date: 3/9/11  
Comments: B110034

APPROVED  
WALK-THRU BUILDING PERMIT  
BP# \_\_\_\_\_ A# N/A  
APP. SAN H3 DATE: 10-12-11  
DESC. OF WORK deck as shown

THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER(HO-94-4113) HAS BEEN FIELD LOCATED BY ESE CONSULTANTS, INC.- PROFESSIONAL LAND SURVEYOR(S), AND IS ACCURATELY SHOWN.

BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER SITE DEVELOPMENT PLAN SETBACK DISTANCES SHOWN HEREON AS "±" HAVE AN ACCURACY OF ±0.1' FOOT.

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR HOPKINS CHOICE, PLAT No 17903. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

INV. AT HOUSE 582.10  
GRD. AT INV. AT HOUSE 584.5  
  
INV. IN TANK 580.7  
INV. OUT TANK 580.4  
TOP OF TANK 581.4  
GROUND OVER TANK 583.5

INV. IN DIST. BOX 580.3  
INV. OUT DIST. BOX 580.0  
GROUND AT BOX 584.0

BASEMENT DOES NOT SEWER BY GRAVITY

DRIVEWAY CULVERT TO BE INSTALLED PER PLAN F-05-29

GRADING AND SEC PER GRADING PLAN GR 10-74

SWM PER FINAL PLAN F 05-29

ADDRESS: 13916 RYON DRIVE  
GLENELG, MD 21737



ESE Consultants Inc.  
7164 Columbia Gateway Dr.  
Suite 203  
Columbia, MD 21046  
TEL: 410-872-9105  
FAX: 410-872-4870

TYPE: HAMPTON (COL)-  
WALK OUT BASEMENT  
ADD 1' TO BASEMENT  
TRADITIONAL FP  
EXPANDED FAMILY ROOM  
BRICK FRONT STOOP  
12' WIDE CONSERVATORY ELITE  
NAPLES SUN ROOM

OPTION No. 017  
OPTION No. 070  
OPTION No. 633  
OPTION No. 023  
OPTION No. 663  
OPTION No. 263021  
OPTION No. 529



PERMIT PLOT PLAN  
LOT #29  
**HOPKINS CHOICE**  
LIBER 07504, FOLIO 0437  
PLAT No. 17903  
FOURTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

DATE: 11/02/10

CHK'D: MJB

SCALE: 1"=40'

JOB#: 2975

FILE: 2975\_LOT\_29 PP

DRAWN: MJB

Nov 02, 2010 - 11:10 am P:\Project\13916 Hopkins Choice\Drawings\Lot 29\PP\LOT 29 PP.dwg MJB/C