

Building Address: 11237 Whithorn Way  
Ellicott City md 21042

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

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

Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 71

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

Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 48779

Existing Use: Vacant

Proposed Use: SFD

Estimated Construction Cost: \$ 350,000

Description of Work: \_\_\_\_\_

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

Was tenant space previously occupied?  Yes  No

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

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

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

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

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

Property Owner's Name: Winchester Homes

Address: 6905 Rockledge Dr. #800

City: Bethesda State: MD Zip Code: 20817

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

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

Phone: 410 279-1624 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 - 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"/> <b>Roadside Tree Project Permit</b> | <input type="checkbox"/> Partial  |
| <input type="checkbox"/> Yes <input type="checkbox"/> No                | <input type="checkbox"/> Other Suppression                                |
| <b>Roadside Tree Project Permit #</b>                                   | No. of Heads:   |

**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>62</u> <u>66</u>                                 | <input type="checkbox"/> Private  |
| 2 <sup>nd</sup> floor: <u>62</u> <u>66</u>                                 | <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: <u>4</u>  | <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"/> <b>Roadside Tree Project Permit</b> |
| Roof:  | <input type="checkbox"/> Yes <input type="checkbox"/> No                |
| <input type="checkbox"/> State Certified Modular                           | <b>Roadside Tree Project Permit #</b>                                   |
| <input type="checkbox"/> Manufactured Home                                 |   |

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 \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

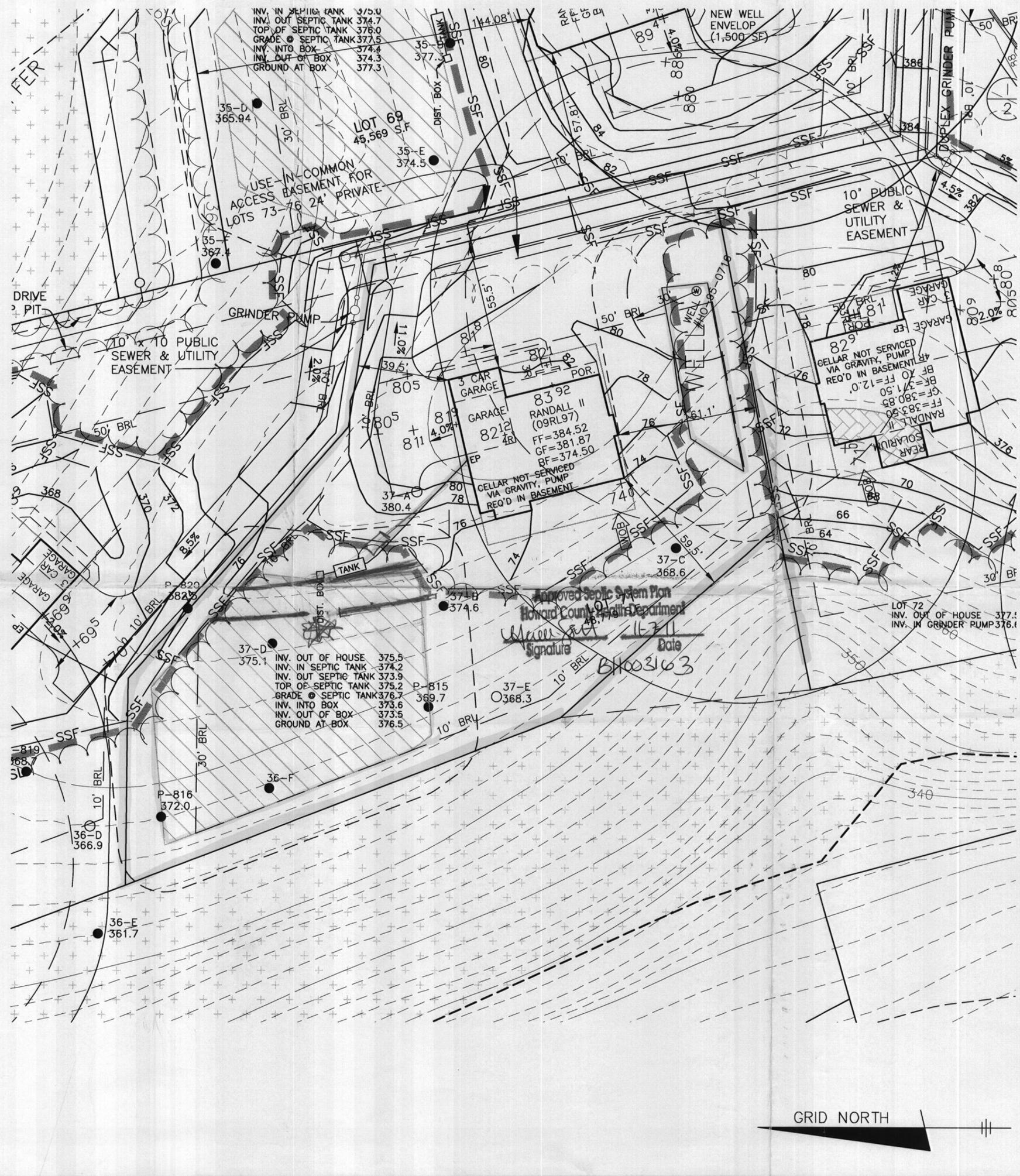
Company \_\_\_\_\_

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 |                |                       |
| SZA (Zoning)       |                |                       |
| SZA (Engineering)  |                |                       |
| Health             | <u>11-7-11</u> | <u>[Signature]</u>    |
| Fire Protection    |                |                       |

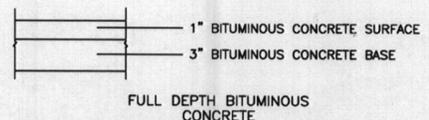
| DPZ SETBACK INFORMATION   |
|---|
| Front:  |
| Rear:   |
| Side:   |
| Side St.:   |
| All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No    |
| Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No           |
| Lot Coverage for New Town Zone:   |
| SDP/Red-line approval date:   |

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



**NOTES:**

1. THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR RIVERWOOD, PLAT No. 19724. REFER TO THE PLAT FOR LOT DIMENSIONS, LOT AREAS AND ALL EASEMENTS.
2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWERAGE EASEMENT. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
3. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER A GRADING PLAN AND MODIFIED FOR THIS SPECIFIC HOUSE.
4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE APPROVED ROAD CONSTRUCTION PLANS AND HAS BEEN FIELD VERIFIED BY J.A. RICE, INC., ON OR ABOUT SEPTEMBER 2002.
5. EXACT LENGTH OF SEPTIC TRENCHES ARE BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF TRENCH LAYOUT AND INSPECTION.
6. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
7. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
8. ALL DRAINAGE AND STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS.
9. SEPTIC TANK FOR THIS LOT TO BE 2,000 GALLONS.
10. THE EXISTING WELL SHOWN ON THIS PLAN, HO-95-0716, HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC. AND IS ACCURATELY SHOWN.
11. THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THIS PROJECT'S BOUNDARY EXCEPT AS NOTED.
12. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
13. STORMWATER MANAGEMENT FOR THE REAR HALF OF THE HOUSE IS PROVIDED BY SHEET FLOW TO CONSERVATION AREAS.



**LEGEND**

- EXISTING CONTOURS ESTABLISHED UNDER F-04-082
- FIELD SURVEYED WELL LOCATION
- PASSED PERCOLATION TEST PER TEST NOTES
- FAILED PERCOLATION TEST PER TEST NOTES
- EXISTING APPROVED SEPTIC RESERVE AREA

**BENCHMARK**  
 ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS  
**ENGINEERING, INC.**

8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418  
 ELLICOTT CITY, MARYLAND 21042  
 PHONE: 410-465-6105 ▲ FAX: 410-465-6644  
 BEI@BEI-CIVILENGINEERING.COM

|  |  |
|--|--|
| OWNER/BUILDER:<br>CAMBERLEY HOMES, INC.<br>6905 ROCKLEDGE DRIVE<br>SUITE 800<br>BETHESDA, MD 20817<br>PHONE: 301-803-4800<br>FAX: 301-803-4929 | PROJECT:<br><b>RIVERWOOD<br/>LOT 71</b>  |
|  | LOCATION:<br>11237 WHITHORN WAY<br>ELLICOTT CITY, MD 21042<br>TAX MAP No. 29 - BLOCK Nos. 3, 4, 9 & 10 - PARCEL No. 20<br>3rd ELECTION DISTRICT, HOWARD COUNTY, MARYLAND |
| TITLE:<br><b>BUILDING PERMIT PLAN</b>  | HOUSE TYPE:<br><b>RANDALL</b>  |
| DATE:<br>August 31, 2011   | PROJECT NO.<br>1950  |
| DESIGN: JMC  | DRAFT: JMC   |
| SCALE:<br>1" = 30'   | DRAWING <u>1</u> OF <u>1</u>   |

