

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
3430 COURT HOUSE DRIVE  
ELLCOTT CITY, MD 21043  
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810  
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER  
308001294

Building Address 10164 Saddlebrook Farm Trail Woodstock Md. 21163  
Suite/Apt. #: SDP/WP/Petition #:  
Census Tract Subdivision Saddlebrook Farm  
Section Area Lot 8  
Tax Map 11 Parcel Grid 11-13  
Zoning Map Coordinates Lot size

Property Owner's Name Kevin and Carol Taylor  
Address 10164 Saddlebrook Farm Trail  
City Woodstock State Md Zip Code 21163  
Phone 410 428 0121 Phone  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Steven H. Cooley 5010 Sheppard Ln  
Ellicott City Md.  
Phone 301 252 0179 Fax 410 531 6574

Existing Use  
Proposed Use  
Estimated Construction Cost \$ 12,000.00  
Description of Work Approx 18'x24' Deck w/ steps to grade

Contractor Company TK Landscaping & Construction  
Contact Person Steve Cooley  
Address 5010 Sheppard Ln  
City Ellicott City State Md Zip Code 21042  
License No. 44986  
Phone 410 531 6608 Fax 410 531 6574

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 Characteristics

Utilities

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Utilities

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

Steven H. Cooley

5-1-08

Title/Company

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

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:

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

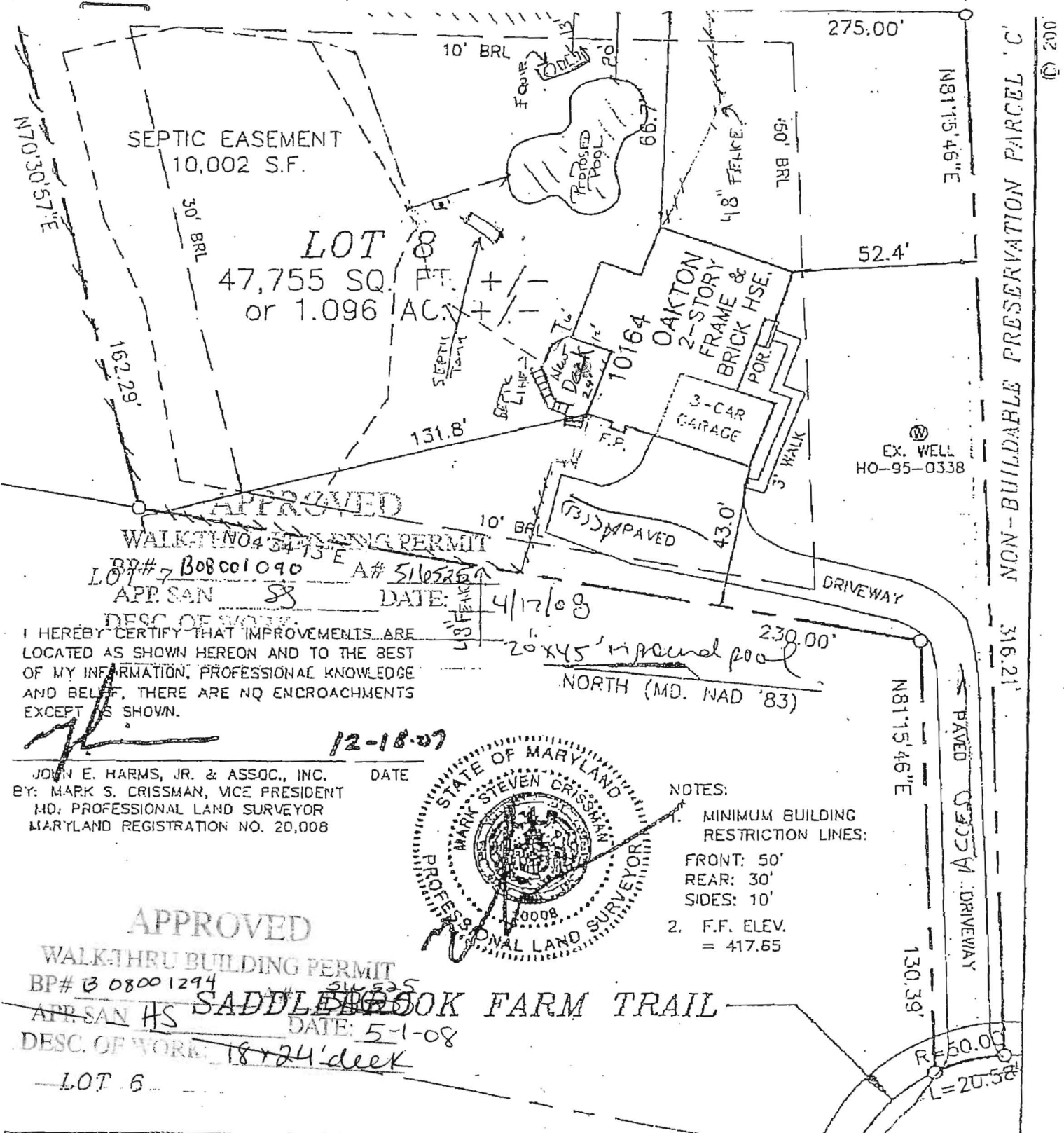
Front: Rear: Side: Side St: All minimum setbacks met? YES NO Is Entrance Permit required? YES NO Historic District? YES NO Lot Coverage for NewTown Zone SDP/Red-line approval date

Filing fee Permit fee Excise tax Add'l per. fee TOTAL FEES Sub-total paid Balance due Check Validation

Accepted by

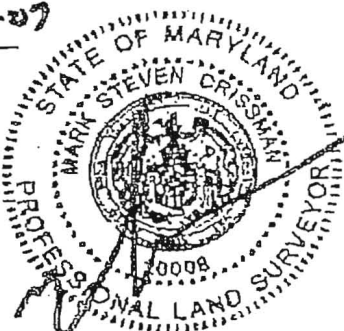
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Rev. 11/4/04



I HEREBY CERTIFY THAT IMPROVEMENTS ARE LOCATED AS SHOWN HEREON AND TO THE BEST OF MY INFORMATION, PROFESSIONAL KNOWLEDGE AND BELIEF, THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

JOHN E. HARMS, JR. & ASSOC., INC. DATE  
BY: MARK S. CRISSMAN, VICE PRESIDENT  
MD: PROFESSIONAL LAND SURVEYOR  
MARYLAND REGISTRATION NO. 20,008



- NOTES:
1. MINIMUM BUILDING RESTRICTION LINES:  
FRONT: 50'  
REAR: 30'  
SIDES: 10'
  2. F.F. ELEV. = 417.65

APPROVED  
WALKTHRU BUILDING PERMIT  
BP# 3 08001294  
APR SAN HS  
DESC. OF WORK: 18x24' deck  
LOT 6  
DATE: 5-1-08

FINAL HOUSE LOCATION  
LOT 8  
SADDLEBROOK FARM  
ix Map 11, Grid 13, Parcels 19 & 32  
THIRD ELECTION DISTRICT  
HOWARD COUNTY, MD  
SCALE: 1"= 40' DATE: Dec. 17, 2007

Craftmark Homes  
Oakton  
10164 Saddlebrook Farm Trail

**HARMS**  
ENGINEERS • PLANNERS • SURVEYORS  
41 E. All Saints St., Suite 210, Frederick, MD 21701  
Office: 301-631-2027 Fax: 301-631-2028

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3400 COURT HOUSE DRIVE ELICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		<b>HOWARD COUNTY</b> <b>PERMIT APPLICATION</b>		<b>PERMIT NUMBER</b> <b>808001090</b>	
Building Address <u>10164 Saddlebrook Farm Trail</u> <u>Woodstock, MD 21163</u>			Property Owner's Name <u>Kevin &amp; Carol Taylor</u> Address <u>10164 Saddlebrook Farm Trail</u>		
Suite/Apt. #: _____ SDP/WP/Petition #: _____			City <u>Woodstock</u> State <u>MD</u> Zip Code <u>21163</u>		
Census Tract _____ Subdivision <u>Saddlebrook Farm</u>			Home Phone <u>4104290121</u> Work Phone _____		
Section _____ Area _____ Lot <u>8</u>			Applicant's Name & Mailing Address, (if other than stated hereon): <u>Rowan Landscape Co., Inc.</u>		
Tax Map <u>11</u> Parcel <u>19+32</u> Grid <u>13</u>			Phone <u>4104890707</u> Fax _____		
Zoning _____ Map Coordinates _____ Lot size _____			Contractor Company <u>Rowan Landscape Co Inc.</u>		
Existing Use <u>SFD</u>			Contact Person <u>Tim Rowan</u>		
Proposed Use <u>SFD</u> <u>Inground Treg Pool</u>			Address <u>16643 Frederick Road</u>		
Estimated Construction Cost \$ <u>30,000.00</u>			City <u>Mt Airy</u> State <u>MD</u> Zip Code <u>21771</u>		
Description of Work <u>20'x45' Regular Inground Pool</u> <u>3' to 8' deep, filled by truck, fence to</u> <u>code</u>			License No. <u>16659</u>		
Occupant or Tenant <u>Kevin &amp; Carol Taylor</u>			Phone <u>443-2774827</u> Fax _____		
Contact Name _____			Engineer or Architect Company _____		
Address _____			Contact Person _____		
City _____ State _____ Zip Code _____			Address _____		
Phone _____ Fax _____			City _____ State _____ Zip Code _____		
Phone _____ Fax _____			Phone _____ Fax _____		

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
<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 checked="" type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" 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 # of Heads _____	<b>Building Characteristics</b> 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: _____ 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: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	<b>Utilities</b> Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" 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.

<u>Mary E. Rowan</u> Applicant's Signature <u>Sec. Rowan Landscape Co Inc</u> Title/Company	<u>Mary E. Rowan, Sec</u> Print Name <u>4/17/2008</u> Date
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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			Side St: _____	Add'l per. fee \$ _____
Health	<u>4/17/08</u>	<u>[Signature]</u>	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:			Lot Coverage for NewTown Zone _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ			Yellow: DED, DPZ	Pink: Health
Gold: SHA				

SEPTIC EASEMENT  
10,002 S.F.

**LOT 8**  
47,755 SQ. FT.  
or 1.096 AC.

**OAKTON**  
2-STORY  
FRAME &  
BRICK HSE.

3-CAR  
GARAGE

EX. WELL  
HO-95-0338

**APPROVED**  
**WALK-THROUGH BUILDING PERMIT**

LOT # 7 B08001294 A# 516526  
APP. SAN 88 DATE: 4/17/08

I HEREBY CERTIFY THAT IMPROVEMENTS ARE  
LOCATED AS SHOWN HEREON AND TO THE BEST  
OF MY INFORMATION, PROFESSIONAL KNOWLEDGE  
AND BELIEF, THERE ARE NO ENCROACHMENTS  
EXCEPT AS SHOWN.

JOHN E. HARMS, JR. & ASSOC., INC.  
BY: MARK S. CRISSMAN, VICE PRESIDENT  
MD: PROFESSIONAL LAND SURVEYOR  
MARYLAND REGISTRATION NO. 20,008

12-18-07

DATE



NOTES:

- MINIMUM BUILDING  
RESTRICTION LINES:  
FRONT: 50'  
REAR: 30'  
SIDES: 10'
- F.F. ELEV.  
= 417.65

**SADDLEBROOK FARM TRAIL**

LOT 6

FINAL HOUSE LOCATION  
**LOT 8**

**SADDLEBROOK FARM**

Tax Map 11, Grid 13, Parcels 19 & 32  
THIRD ELECTION DISTRICT  
HOWARD COUNTY, MD

SCALE: 1" = 40' DATE: Dec. 17, 2007

Craftmark Homes  
Oakton  
10164 Saddlebrook Farm Trail

**HARMS**

ENGINEERS • PLANNERS • SURVEYORS  
41 E. All Saints St., Suite 210, Frederick, MD 21701  
Office: 301-631-2027 Fax: 301-631-2028



DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3400 COURT HOUSE DRIVE ELLESMERE CITY AND TOWNS PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		<b>HOWARD COUNTY PERMIT APPLICATION</b>		<b>PERMIT NUMBER</b> <u>B07002286</u>	
<b>Building Address</b> <u>10164 Saddlebrook Farms</u> <u>Windsor, MD 21143</u> <b>Suite/Apt. #:</b> _____ <b>SDP/WP/Petition #:</b> <u>14123</u> <b>Census Tract</b> _____ <b>Subdivision</b> <u>Saddlebrook Farm</u> <b>Section</b> _____ <b>Area</b> _____ <b>Lot</b> <u>8</u> <b>Tax Map</b> <u>11</u> <b>Parcel</b> <u>19</u> <b>Grid</b> <u>8 13</u> <b>Zoning</b> <u>RC</u> <b>Map Coordinates</b> _____ <b>Lot size</b> <u>1.09/Ac</u>		<b>Property Owner's Name</b> <u>Shaleheart LC</u> <b>Address</b> <u>610 Saddlebrook Estates</u> <u>1355 Brandy, Md 21157</u> <b>City</b> <u>Windsor</u> <b>State</b> <u>VA</u> <b>Zip Code</b> <u>22101</u> <b>Home Phone</b> <u>703-252-0956</u> <b>Work Phone</b> _____ <b>Applicant's Name &amp; Mailing Address, (if other than stated hereon)</b> <u>Rachel Carr, EPS</u> <u>1053 Gaiter Rd, Rockville, MD 20850</u> <b>Phone</b> <u>301-955-7305</u> <b>Fax</b> _____			
<b>Existing Use</b> <u>Vacant lot</u> <b>Proposed Use</b> <u>SFD</u> <b>Estimated Construction Cost</b> \$ <u>235,000</u> <b>Description of Work</b> <u>NAS SFD, DAKOTA Model</u> <u>ON File E10#2, AH 7th Flr, Mon. Rm.</u> <u>Fin. Bsch: Br/Den/Bath, Walk in</u> <u>Bsmt.</u>		<b>Contractor Company</b> <u>Shelburne Homes</u> <b>Contact Person</b> <u>Brian Parent</u> <b>Address</b> <u>6820 Elm St</u> <b>City</b> <u>Windsor</u> <b>State</b> <u>VA</u> <b>Zip Code</b> <u>22101</u> <b>License No.</b> <u>751 112</u> <b>Fax</b> _____ <b>Engineer or Architect Company</b> _____ <b>Contact Person</b> _____ <b>Address</b> _____ <b>City</b> _____ <b>State</b> _____ <b>Zip Code</b> _____ <b>Phone</b> _____ <b>Fax</b> _____			
<b>Occupant or Tenant</b> <u>Owner</u> <b>Contact Name</b> _____ <b>Address</b> _____ <b>City</b> _____ <b>State</b> _____ <b>Zip Code</b> _____ <b>Phone</b> _____ <b>Fax</b> _____					

- Shaleheart LC-

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
<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 1st floor: <u>40</u> x <u>60</u> 2nd floor: <u>40</u> x <u>60</u> Basement: <u>40</u> x <u>60</u> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawlspace <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u> 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: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	<b>Utilities</b> Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:

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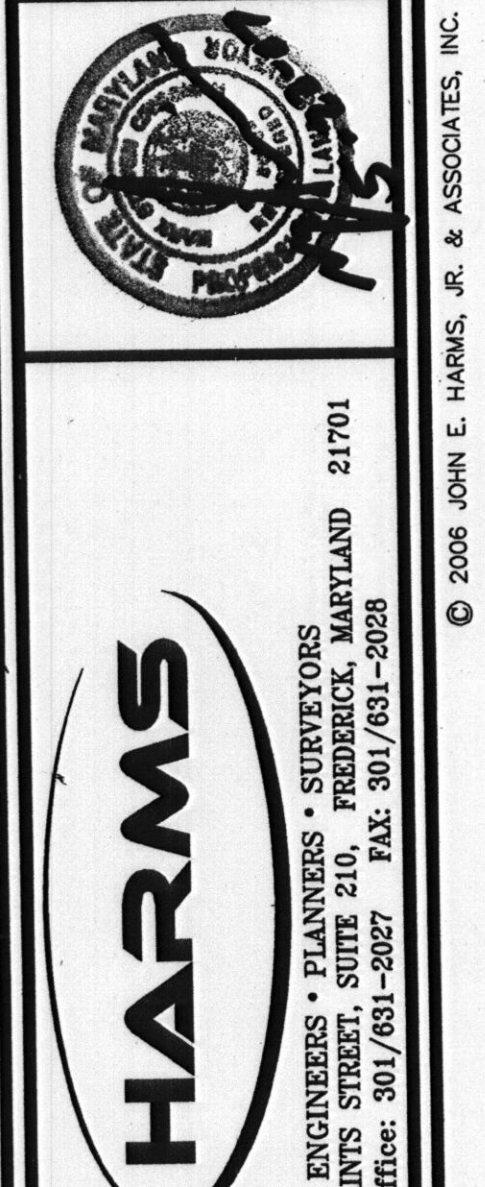
<u>[Signature]</u> <b>Applicant's Signature</b>	<u>Rachel Carr</u> <b>Print Name</b> <u>7/10/07</u> <b>Date</b>
--	--

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

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 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
**FOR OFFICE USE ONLY**

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY IDE
Land Development, DPZ			Front: _____	Filing fee \$ <u>100.00</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St: _____	Add'l per. fee \$ _____
Health	<u>7/10/07</u>	<u>[Signature]</u>	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 # <u>2980</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>			Historic District?	Validation # _____
			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies- While: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			Lot Coverage for NewTown Zone _____ SDP/Red-line approval date _____ Accepted by _____	





GP-07-62