G00000411c

DEPARTMENT 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

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B00153778 PAM

Building Address 14318 Roxbury Lake Dr
Glenelg MD 21737

Suite/Apt. #: ____ SDP/WP/Petition #: ____

Census Tract 604002 Subdivision TRIADELPHIA CROSSING

Section ____ Area ____ Lot 6

Tax Map 21 Parcel 97 Grid 17

Zoning RC-DEO Map Coordinates 9D12 Lot size 1.12 AC

Property Owner's Name Toll Bros. Inc

Address 7164 Columbia Gateway Dr #230

City Columbia State MD Zip Code 21046

Home Phone ____ Work Phone 410 872 9165

Applicant's Name & Mailing Address, (if other than stated hereon): Contact Brett Roberts

Phone 410 459 5575 Fax 410-872-9141

Existing Use Vacant Lot

Proposed Use Single Family Dwelling

Estimated Construction Cost $ 355,000

Description of Work Chamberlain - Country Manor 4 Bedrooms 4 Full Baths 2 Half Baths Conservatory Addition with Suite Above Palladian Kitchen Expanded Family Room ...

Contractor Company Toll Bros Inc

Contact Person Brett Roberts

Address 7164 Columbia Gateway Dr #230

City Columbia State MD Zip Code 21046

License No. ____

Phone 410-872-9165 Fax 410-872-9141

Occupant or Tenant Toll Bros Inc

Contact Name Brett Roberts

Address 7164 Columbia Gateway Dr #230

City Columbia State MD Zip Code 21046

Phone 410-872-9165 Fax 410-872-9141

Engineer or Architect Company Benchmark Engineering

Contact Person Dave Thompson

Address 8480 Balt. Nat'l Pike #418

City Ellicott City State MD Zip Code 21043

Phone 410 465-6105 Fax 410 465 6644

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:
- ____ Reinforced Concrete
- ____ Structural Steel
- ____ Masonry
- ____ Wood Frame

____ State Certified Modular

Utilities

Water Supply:
- ____ Public
- ____ Private

Sewage Disposal:
- ____ Public
- ____ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
- ____ Full
- ____ Partial
- ____ Other Suppression
- ____ # of Heads

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☐ SF Townhouse ☐

	Depth	Width
1st floor:	71'	94'
2nd floor:	71'	94'
Basement:	71'	94'

Finished Basement ☐ Unfinished Basement ☒
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms 4
Height: 38'

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

Utilities

Water Supply:
- ____ Public
- X Private

Sewage Disposal:
- ____ Public
- X Private

Electric Yes ☒ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☒

Sprinkler system: N/A ☒
- ____ 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 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 Brett Roberts — *Print Name* Brett Roberts

Title/Company Construction Manager/Toll Bros Inc — *Date* 5/16/05

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

- FOR OFFICE USE ONLY -

65633

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	6/8/05	[signature]
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#:

Filing fee	$ 100
Permit fee	$
Excise tax	$
Add'l per. fee	$
TOTAL FEES	$
Sub-total paid	$
Balance due	$
Check	# 5420203
Validation	# 58709

Accepted by ____

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

T:forms\PERMIT.FRM Rev. 11/4/04