M/C 3/27/06

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 B00158626

Building Address 10901 TOMPKINS WAY
WOODSTOCK MD 21163
Suite/Apt. #: ________ SDP/WP/Petition #: #17060 6P0572
Census Tract 603000 Subdivision PRESERVE AT WAVERLY GLEN
Section ______ Area ______ Lot 1
Tax Map 31 Parcel 226 Grid 23
Zoning RC-DEO Map Coordinates 6B13 Lot size 52,987 ft

Property Owner's Name TRINITY QUALITY HOMES INC
Address 3675 PARK AVE
City ELLICOTT CITY State MD Zip Code 21043
Home Phone ________ Work Phone 410-313-5722
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone 410-313-8722 Fax 410-313-8731

Existing Use SFD UNDER CONSTRUCTION
Proposed Use DECK
Estimated Construction Cost $ 10,000
Description of Work IRREGULAR SHAPED DECK W/STEPS 25'x21'

Contractor Company SAME
Contact Person
Address
City ______ State ______ Zip Code ______
License No. 699
Phone ______ Fax ______

Occupant or Tenant N/A
Contact Name
Address
City ______ State ______ Zip Code ______
Phone ______ Fax ______

Engineer or Architect Company SAME
Contact Person
Address
City ______ State ______ Zip Code ______
Phone ______ Fax ______

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:
2nd floor:
Basement:
Finished Basement ☒ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms 4
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: DECK
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.

Sally L Hodge
Applicant's Signature

SALLY HODGE
Print Name

VP, OPERATIONS - TRINITY
Title/Company

3/22/06
Date

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

66114

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
✓ Land Development, DPZ		
State Highways		
✓ Building Official		
Dev. Engineering, DPZ		
✓ Health	4/11/06	[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 New/Town Zone ______
SDP/Red-line approval date ______

PROPERTY ID#:

Filing fee	$
Permit fee	$ 50.00
Excise tax	$ 5.00
Add'l per. fee	$
TOTAL FEES	$ 55.00
Sub-total paid	$
Balance due	$
Check	# 10054
Validation	# 110599

Accepted by [initials]

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

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G-9321

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1610
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B05154509AM

Building Address 10901 TOMPKINS WAY - WOODSTOCK 21163
TAX ID 01-463221
Suite/Apt. #: SDP/WP/Petition #: SP05 73
Census Tract 6037 Subdivision PRESERVE AT WAVERLY GLEN
Section Area Lot 1
Tax Map 31 Parcel 226 Grid 23
Zoning RC-DEO Map Coordinates 6B13 Lot size 52,967

Property Owner's Name TRINITY QUALITY HOMES INC
Address 3675 PARK AVE #301
City ELLICOTT CITY State MD Zip Code 21043
Home Phone Work Phone 410-313-872
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone Fax 410-313-5731

Existing Use VACANT LOT
Proposed Use SFD
Estimated Construction Cost $ 310,000
Description of Work ELLICOTT MANOR - 2 STORY, FULL BSMT - 13R - 4FB - 2HB - 2FP - 3GARAGE (4BR) - FINISHED BSMT W/FB

Contractor Company SAME
Contact Person
Address
City State Zip Code
License No. 695
Phone Fax

Occupant or Tenant N/A
Contact Name
Address
City State Zip Code
Phone Fax

Engineer or Architect Company SAME
Contact Person
Address
City State Zip Code
Phone Fax

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics

Height:
No. of stories:
Gross area, sq. ft. per floor:
Use group:
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___ 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

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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
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Sally L. Hodge
Applicant's Signature

SALLY HODGE
Print Name

VP, OPERATIONS - TRINITY
Title/Company

6/17/05
Date

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Building Official		
Dev. Engineering, DPZ		
Health	7/27/05	[signature]
Fire Protection		

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ONE STOP SHOP: ☐

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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

PROPERTY ID#:
Filing fee $ 100.00
Permit fee $
Excise tax $
Add'l per. fee $
TOTAL FEES $
Sub-total paid $
Balance due $
Check # 6255
Validation #

Accepted by

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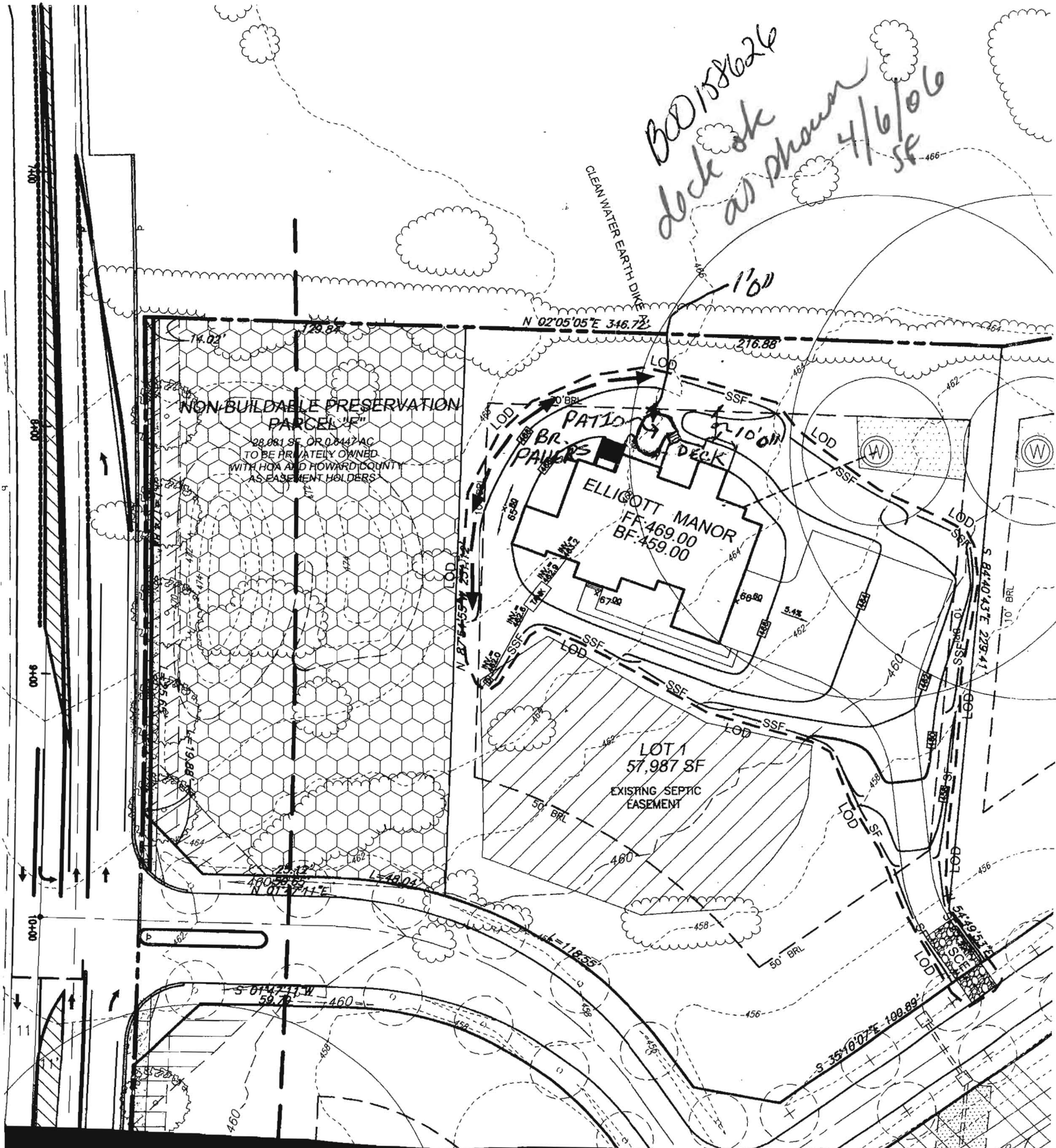

B0D158626
deck ok as shown 4/6/06 SF
CLEAN WATER EARTH DIKE
N 02°05'05"E 346.72'
129.84
14.02'
216.88
NON-BUILDABLE PRESERVATION
PARCEL "F"
28,081 SF. OR 0.6447 AC
TO BE PRIVATELY OWNED
WITH HOA AND HOWARD COUNTY
AS EASEMENT HOLDERS
PATIO
BR. PAVERS
DECK
1'0"
10'0"
ELLICOTT MANOR
FF:469.00
BF:459.00
LOD
SSF
SF
30' BRL
10' BRL
50' BRL
LOT 1
57,987 SF
EXISTING SEPTIC
EASEMENT
S 84°40'43"E 229.41
S 54°49'53"E
S 35°10'07"E 100.89'
SCE
L=48.04
L=118.55
L=19.88
N 01°17'11"E
S 01°47'11"W
59.79
466
464
462
460
458
456