

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLSWORTH CITY, MD 21143 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION		PERMIT NUMBER B00159919	
Building Address <u>44615 Riggs Meadow Dr.</u> <u>Cooksville, MD 21723</u>			Property Owner's Name <u>Robert & Anita Tempchin</u>		
Suite/Apt. #: _____ SDP/WP/Petition #: _____			Address <u>Same as building address</u>		
Census Tract _____ Subdivision _____			City _____ State _____ Zip Code _____		
Section _____ Area _____ Lot _____			Home Phone <u>410 489 9415</u> Work Phone <u>301 565 9691</u>		
Tax Map _____ Parcel _____ Grid _____			Applicant's Name & Mailing Address, (if other than stated hereon): _____		
Zoning _____ Map Coordinates _____ Lot size _____			Phone _____ Fax _____		
Existing Use <u>Single Family House</u>			Contractor Company _____		
Proposed Use <u>Deck</u>			Contact Person _____		
Estimated Construction Cost \$ _____			Address _____		
Description of Work <u>2 level deck on the back</u> <u>of the house</u> <u>10x10 hexagon</u> <u>18x12 rectangular shape</u>			City _____ State _____ Zip Code _____		
Occupant or Tenant _____			License No. _____		
Contact Name _____			Phone _____ Fax _____		
Address _____			Engineer or Architect Company _____		
City _____ State _____ Zip Code _____			Contact Person _____		
Phone _____ Fax _____			Address _____		
			City _____ State _____ Zip Code _____		
			Phone _____ Fax _____		

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
<u>Building Characteristics</u>	<u>Utilities</u>	<u>Building Characteristics</u>	<u>Utilities</u>
Height: _____	Water Supply: _____ Public _____ Private _____	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	1st floor: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>	Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	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: _____ State Certified Modular _____ Manufactured Home _____	Sprinkler system: N/A <input type="checkbox"/> 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

Print Name

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			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health	<u>5/30/06</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- White: Building Official			Lot Coverage for NewTown Zone _____	
Green: LDD, DPZ			SDP/Red-line approval date _____	Accepted by _____
Yellow: DED, DPZ				
Pink: Health				
Gold: SHA				

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Rev. 11/4/04

CASE NO. LA 05714VR

LOCATION DRAWING
RIGGS MEADOW
LOT 6
ELECTION (4th.) DISTRICT
HOWARD COUNTY, MARYLAND

RIGGS MEADOW DRIVE
(50' R/W)

R=425.00'
A=30.02'

APPROVED

WALK-THRU BUILDING PERMIT
BP# 1300159919 A# 50368-A
APP. SAN SF DATE: 5/30/06
DESC. OF WORK:

10' No hexagon
and 18' x 12' rectangle.

LOT 5

PRIVATE USE-IN-COMMON
EASEMENT FOR INGRESS AND
EGRESS TO LOTS 5 AND 6.

S 85°56'32" E 213.73'

10' B.R.L.

Well

Septic

LOT 6
68,134 sq.ft.

PRIVATE SEPTIC
EASEMENT

S 00°53'49" W 249.86'

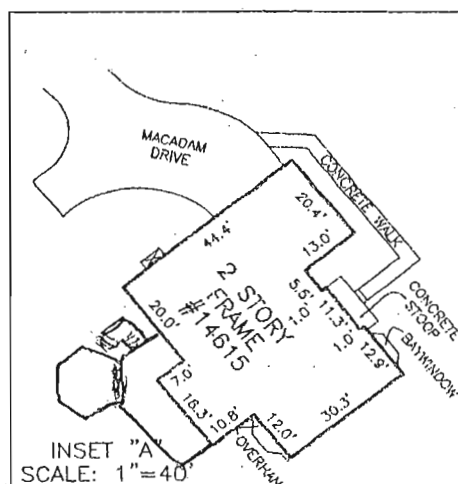
S 00°53'49" W 249.86'

30' B.R.L.

PART OF PRESERVATION PARCEL B
FOR AGRICULTURAL PRESERVATION

LEGEND
B.R.L.=BUILDING RESTRICTION LINE

PART OF PRESERVATION PARCEL B
FOR AGRICULTURAL PRESERVATION



INSET "A"
SCALE: 1"=40'

PROPERTY ADDRESS: 14615 RIGGS MEADOW DRIVE

THE PROPERTY SHOWN HEREON IS LOCATED IN ZONE C (AREA OF MINIMAL
FLOODING) ACCORDING TO NATIONAL FLOOD INSURANCE PROGRAM F.I.R.M. MAP
COMMUNITY PANEL NO. 240044 0008 B AS REVISED 12/04/86

CERTIFICATE
I HEREBY DECLARE THAT THE POSITION OF ALL
THE VISIBLE EXISTING IMPROVEMENTS SHOWN ON
THE ABOVE DESCRIBED PROPERTY HAVE BEEN
ESTABLISHED BY PROPER FIELD METHODS. NO TITLE
REPORT HAS BEEN FURNISHED. SUBJECT TO ANY AND
ALL RESTRICTIONS AND EASEMENTS OF RECORD.

RAYMOND J. FOWLER
MARYLAND PROFESSIONAL LAND SURVEYOR NO. 21134

REFERENCES
PLAT BK.
PLAT NO. 12961

LIBER
FOLIO

**ALL COUNTY
LOCATION SURVEYS, INC**
2813 PATUXENT RIVER ROAD, DAVIDSONVILLE, MD. 21035
PHONE (410) 798-9701 FAX (410) 798-9705

DATES: SCALE: 1"=80'
WALL CHECK: DRAWN BY: SAD
HSE. LOC.: 10/20/05 JOB NO.: 2735-05
BOUNDARY:

- NOTES: 1) This location drawing is for benefit to a consumer only in so far as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing.
2) This location drawing is not to be used for the building of fences or other improvements. No boundary survey has been performed.
3) This location drawing is not to be relied upon for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing.
4) B.R.L. information, if shown was obtained from existing record plat or was provided to ACLS, and is not guaranteed by ACLS, Inc.
5) Flood Zone information is subject to the interpretation of the originator.
6) Adjoiner deed research has not been undertaken with the Location Drawing.
7) ACLS, Inc. does not certify to unshown or unrecorded encroachments or overlaps.
8) Level of accuracy 2'±.

3/7/00
Septic G.O.
Late A.M.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

P 513221

A 50368-A

DISTRICT _____

DATE 1/11/2000

DATE SYSTEM APPROVED 3/7/00

INSPECTOR DKS (SRK)

RPS - NOT EXIST
INDEXED

Walter W. King Plumbing & Heating

IS PERMITTED TO INSTALL ☒ ALTER _____

ADDRESS 5305 King's Court, Frederick, MD 21703 PHONE 301-662-6990

SUBDIVISION Riggs Property LOT 6 ROAD 14615 Riggs Meadow Drive

PROPERTY OWNER Ryan Homes

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

**BUILDING PERMIT SIGNED
AND RETURNED**

5/13/06 - 80059919 - 10x10 deck

TRENCHES - Trench to be 3 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Place the distribution box 130 feet off the 217.73' lot line and 105 feet off the 249.86' lot line as seen from the pipestem off Riggs Meadow Drive. Run trenches along contour towards the 249.86' lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 1/3/00 DKS

PLANS APPROVED BY Donna K. Soe

DATE 12/21/99

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A 50368 A