Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: 3/11/19

Permit No.: B19000045

Building Address: 710 WOODBINE CROSSING RD
City: [illegible] State: MD Zip Code: [illegible]
Suite/Apt. #: SDP/WP/BA #:
Subdivision: Woodbine Crossing
Lot: A Tax Map: 2 Parcel: 252

Existing Use: VACANT LOT
Proposed Use: SFD
Estimated Construction Cost: $ 350,000.
Description of Work: CONSTRUCT A SFD WITH 3 BEDROOMS 3-½ BATHS, 2 CAR GARAGE W/ BRICK, SIDING, CANVAS FRONT PORCH

Occupant/Tenant Name:
Was tenant space previously occupied? ☐Yes ☐No
Contact Name:
Address:
City: State: Zip Code:
Phone: Fax:
Email:

Property Owner's Name: [illegible]
Address: [illegible]
City: [illegible] State: [illegible] Zip Code: [illegible]
Phone: Fax:
Email: [illegible]

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: [illegible]
Address: [illegible]
City: [illegible] State: [illegible] Zip Code: [illegible]
Phone: [illegible] Fax:
Email: [illegible]

Contractor Company: [illegible]
Contact Person: [illegible]
Address: [illegible]
City: [illegible] State: [illegible] Zip Code: [illegible]
License No. : [illegible]
Phone: [illegible] Fax:
Email: [illegible]

Engineer/Architect Company:
Responsible Design Prof.:
Address:
City: State: Zip Code:
Phone: Fax:
Email:

Commercial Building Characteristics	***Residential Building Characteristics***
Height:	☑ SF Dwelling ☐ SF Townhouse
No. of stories:	**Depth** **Width**
Gross area, sq. ft./floor:	1st floor:
	2nd floor:
Area of construction (sq. ft.):	Basement:
	☐ Finished Basement
Use group:	☑ Unfinished Basement
	☐ Crawl Space
Construction type:	☐ Slab on Grade
☐ Reinforced Concrete	No. of Bedrooms: 4
☐ Structural Steel	***Multi-family Dwelling***
☑ Masonry	No. of efficiency units:
☑ Wood Frame	No. of 1 BR units:
☐ State Certified Modular	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
Roadside Tree Project Permit	Footings:
☐Yes ☐No	Roof:
Roadside Tree Project Permit #	☐ State Certified Modular
	☐ Manufactured Home

Utilities	
Electric: ☑ Yes ☐ No	
Gas: ☑ Yes ☐ No	
Water Supply	
☐ Public	
☑ Private	
Sewage Disposal	
☐ Public	
☑ Private	
Heating System	
☐ Electric ☐ Oil	
☐ Natural Gas ☑ Propane Gas	
☐ Other:	
Sprinkler System:	
☑ Yes ☐ No	
Grading Permit Number:	
2-19-013	
Building Shell Permit Number:	

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 COMPL 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 THI 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***

Email Address ***Date*** 3/6/19

Title/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		
PSZA (Zoning)		
PSZA (Engineering)		
Health	5/1/19	H. Oswald

Is Sediment Control approval required for issuance? ☐ Yes ☐ No
☐ CONTINGENCY CONSTRUCTION START

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:

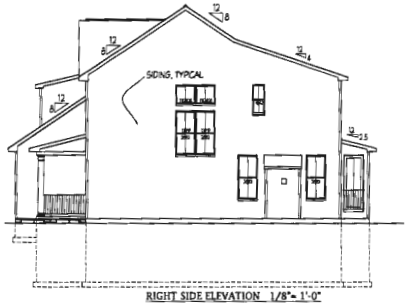
Filing Fee	$ 100
Permit Fee	$
Tech Fee	$
Excise Tax	$
PSFS	$ 50
Guaranty Fund	$
Add'l per Fee	$
Total Fees	$
Sub- Total Paid	$
Balance Due	$
Check	# 2614

Distribution of Copies: **White: Building Officials** **Green: PSZA,Zoning** **Yellow: PSZA,Engineering** **Pink: Health** **Gold: SHA**

B19000645

LEFT SIDE ELEVATION 1/8"= 1'-0"

REAR ELEVATION 1/8"= 1'-0"



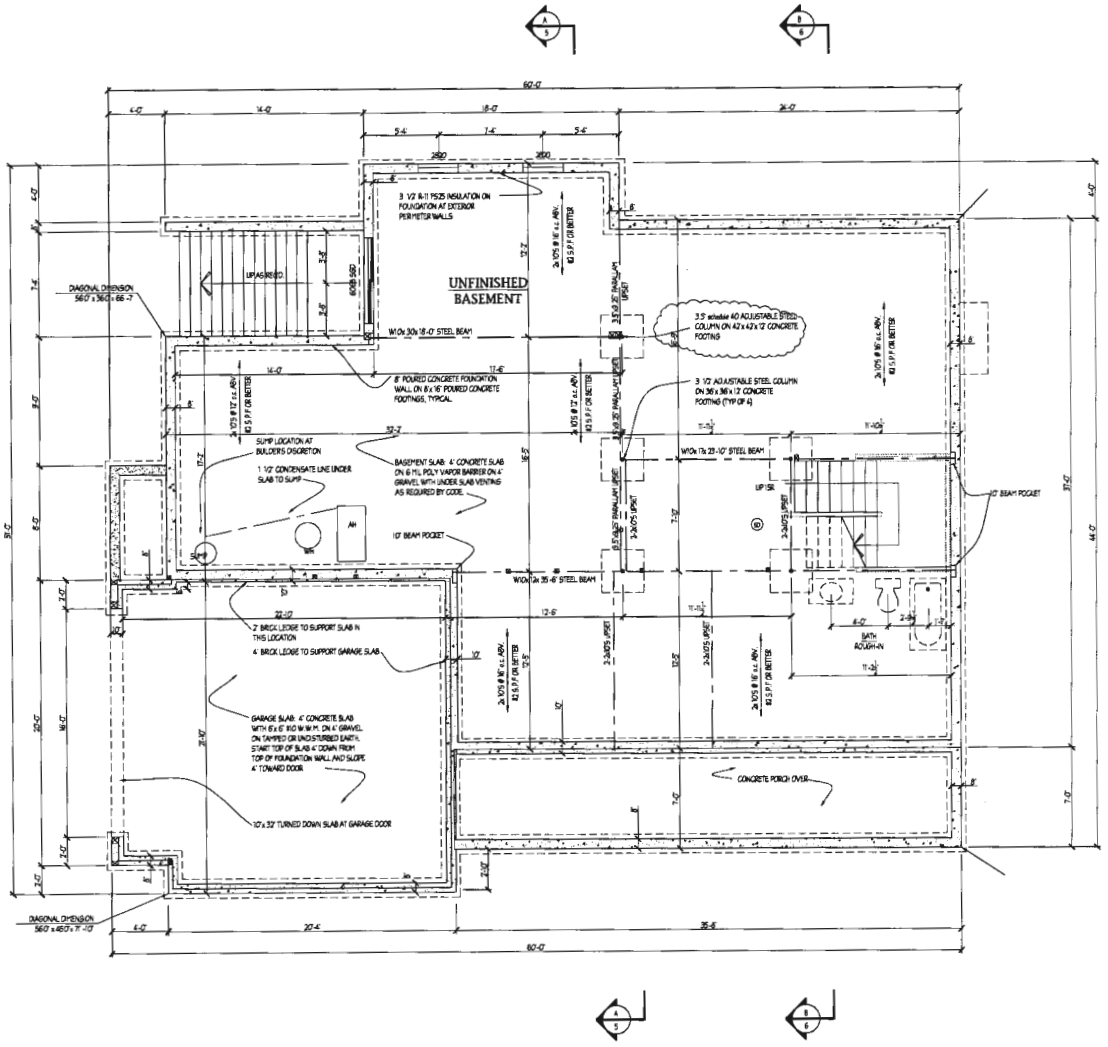
RIGHT SIDE ELEVATION 1/8"= 1'-0"

FRONT ELEVATION 1/4"= 1'-0"

BID AND PERMIT SET 2/28/19

Drawing: ELEVATIONS
Project: OPTIMUM PROPERTIES
RIDGEFIELD
HOWARD COUNTY MD.
Notes:
Project No.: 2019A
Date: 2/19
Scale: NOTED
1

HEALTH DEPARTMENT 710 WOODBINE CROSSING ROAD.



NOTE: SUBSTITUTION OF ENGINEERED I-JOISTS DESIGNED BY OTHERS IN LIEU OF DIMENSIONAL 2x LUMBER SPECIFIED FOR FLOOR FRAMING IS ACCEPTABLE

BID AND PERMIT SET 2/28/19

tim graham 2/27/2019 8:39 AM Ridgefield plan 02.dwg

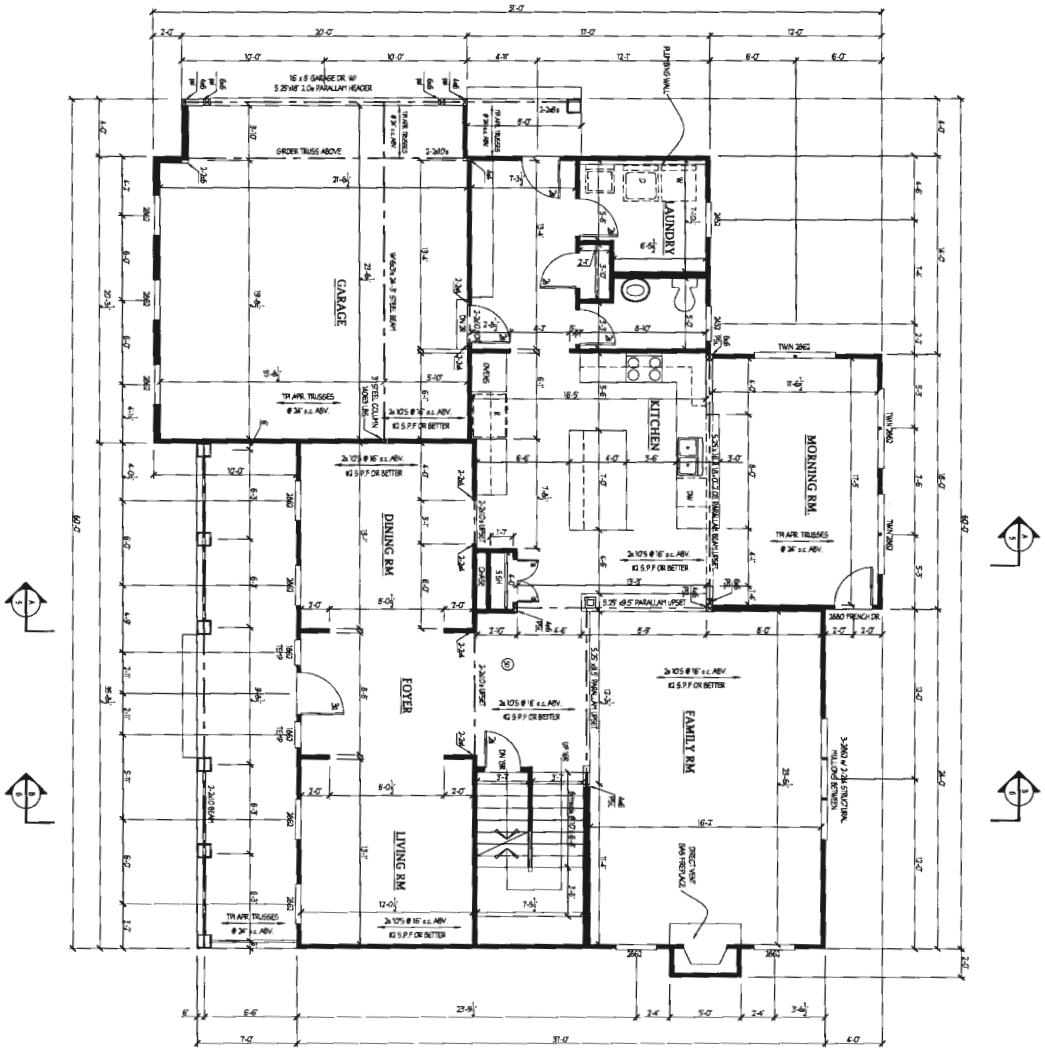
Notes:

Drawing: BASEMENT/ FOUNDATION PLAN

Project: OPTIMUM PROPERTIES
RIDGEFIELD
HOWARD COUNTY MD.

Project No.: 2019A
Date: 2/19
Scale: 1/4"=1'-0"

2



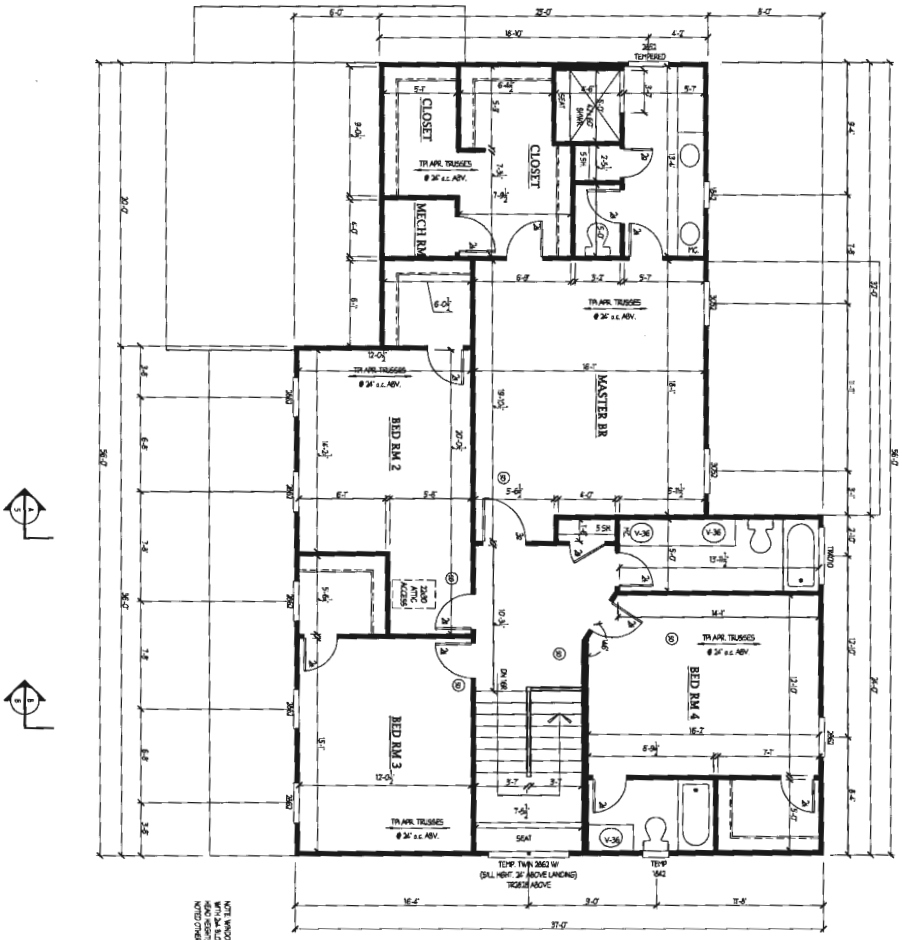
NOTE: SUBSTITUTION OF ENGINEERED I-JOISTS OR TRUSSES SPECIFIED FOR FLOOR FRAMING IS ACCEPTABLE.

NOTE: WINDOW HEADER HEIGHTS ARE 6'-8" WITH 2x8 SLOCKING BELOW, AND DOOR HEAD HEIGHTS ARE AT 7'-0" UNLESS NOTED OTHERWISE.

BID AND PERMIT SET 2/28/19

3	Project No.: 2019A	Drawing: FIRST FLOOR PLAN	Notes:	
	Date: 2/19	Project: OPTIMUM PROPERTIES RIDGEFIELD HOWARD COUNTY MD.		
	Scale: 1/4"=1'-0"			

2/27/2019 8:39 AM



BID AND PERMIT SET 2/8/19

4	Project No.: 2019A	Drawing: SECOND FLOOR PLAN	Notes:	
	Date: 2/19	Project: OPTIMUM PROPERTIES RIDGEFIRLD HOWARD COUNTY MD.		
	Scale: 1/4"=1'-0"			

PLOT/GRADING PLAN
SEDIMENT CONTROL PLAN

Permit Number

Property Owner LDG, INC.
Builder OPTIMUM PROPERTIES, LLC
Subdivision Name WOODBINE CROSSING
Lot Number PARCEL 'A' Plat# 20054-20056
Street(s) #710 WOODBINE CROSSING ROAD
Water PRIVATE Sewer PRIVATE
Scale 1"=200'
Front Yard Setback 590'± ft.
Right Yard Setback 60'± ft.
Left Yard Setback 230'± ft.
Rear Yard Setback 315'± ft.

Peter L. Podolak, P.E.
Reg. #19561

I hereby certify that these documents were prepared or approved by me, and I am a duly licensed professional engineer under the laws of the State of Moryland, license no. 19561, expiration date: 3-3-2020.

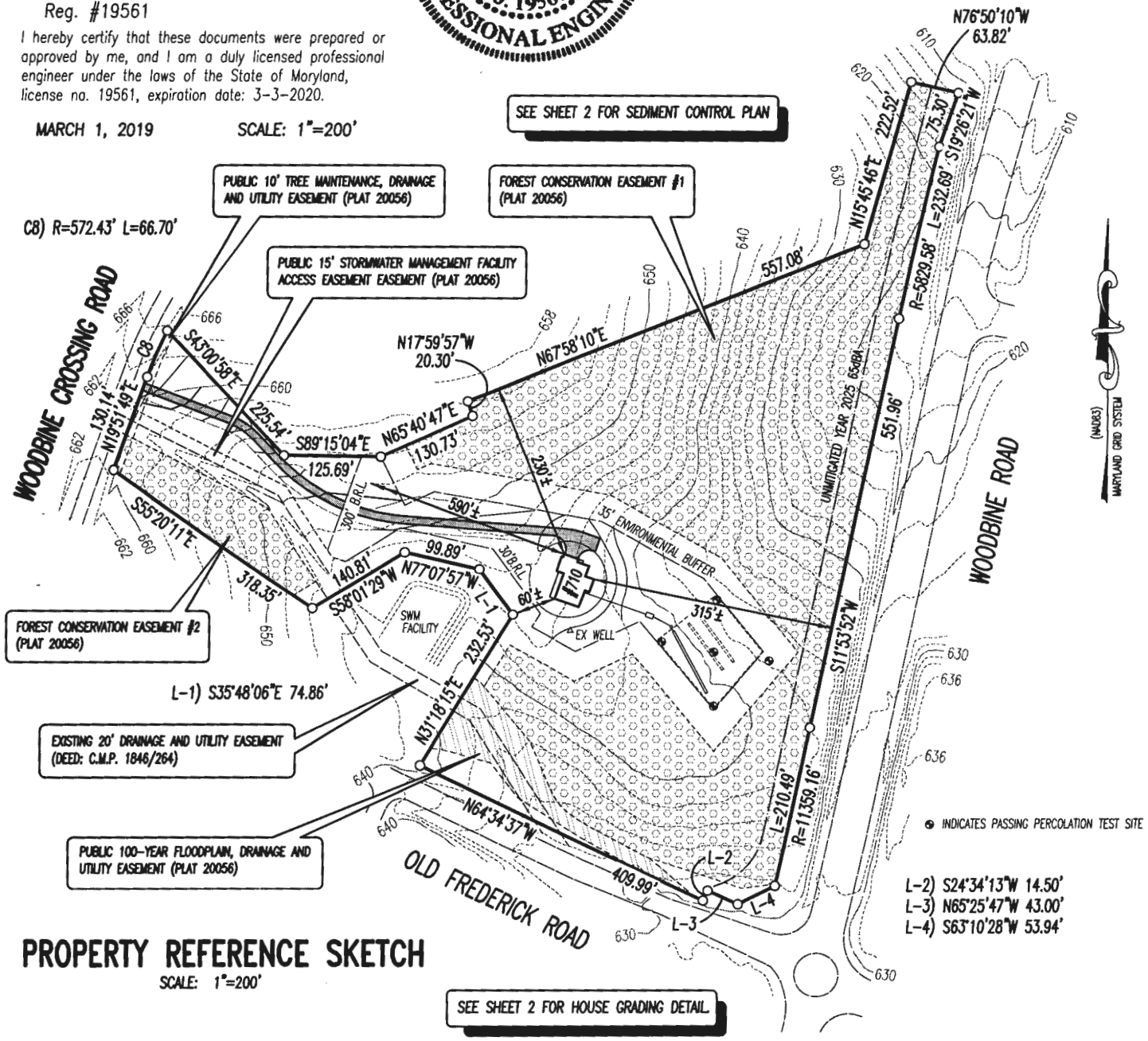
STATE OF MARYLAND
PETER LEON PODOLAK
No. 19561
PROFESSIONAL ENGINEER

PREPARED BY:
LEON A. PODOLAK AND ASSOCIATES, L.L.C.
147 E. MAIN STREET P.O. BOX 266
WESTMINSTER, MARYLAND 21157
PHONE: (410) 848-2229 (410) 876-1226
FAX: (410) 848-2258
email: drawings@lapodolak.com

CURRENT TITLE REFERENCE
LDG, INC. DEED: C.M.P. 1988/258
PLAT: WOODBINE CROSSING - PARCEL 'A'
PLAT NO. 20054-20056 10.0619 ACRES±
Tax Map: 2 Grid: 24 Parcel: 253
Tax acct. no.: 04-374568
PROPERTY ZONING: RC-DEO - Rural Residential

MARCH 1, 2019 SCALE: 1"=200'

SEE SHEET 2 FOR SEDIMENT CONTROL PLAN



L-1) S35°48'06"E 74.86'

L-2) S24°34'13"W 14.50'
L-3) N65°25'47"W 43.00'
L-4) S63°10'28"W 53.94'

PROPERTY REFERENCE SKETCH
SCALE: 1"=200'

SEE SHEET 2 FOR HOUSE GRADING DETAIL

#710 WOODBINE CROSSING ROAD
WOODBINE CROSSING - PARCEL 'A' - Howard Co. Tax Map: 2 Grid: 24 Parcel: 253 Tax acct. no.: 04-374568
CURRENT TITLE REFERENCE: LDG, INC. DEED: C.M.P. 1988/258 PLAT: WOODBINE CROSSING - PARCEL 'A' PLAT NO. 20054-20056 10.0619 ACRES±

\\Job Files\Catonsville Homes\Woodbine Crassing\Plot-Grading Plan r1.dwg 3-1-2019

PLOT/GRADING PLAN
SEDIMENT CONTROL PLAN

Permit Number

Property Owner LDG, INC.
Builder OPTIMUM PROPERTIES, LLC
Subdivision Name WOODBINE CROSSING
Lot Number PARCEL 'A' Plat# 20054-20056
Street(s) #710 WOODBINE CROSSING ROAD
Water PRIVATE Sewer PRIVATE
Scale 1"=200'
Front Yard Setback 590'± ft.
Right Yard Setback 60'± ft.
Left Yard Setback 230'± ft.
Rear Yard Setback 315'± ft.

PREPARED BY:
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Tax Map: 2 Grid: 24 Parcel: 253
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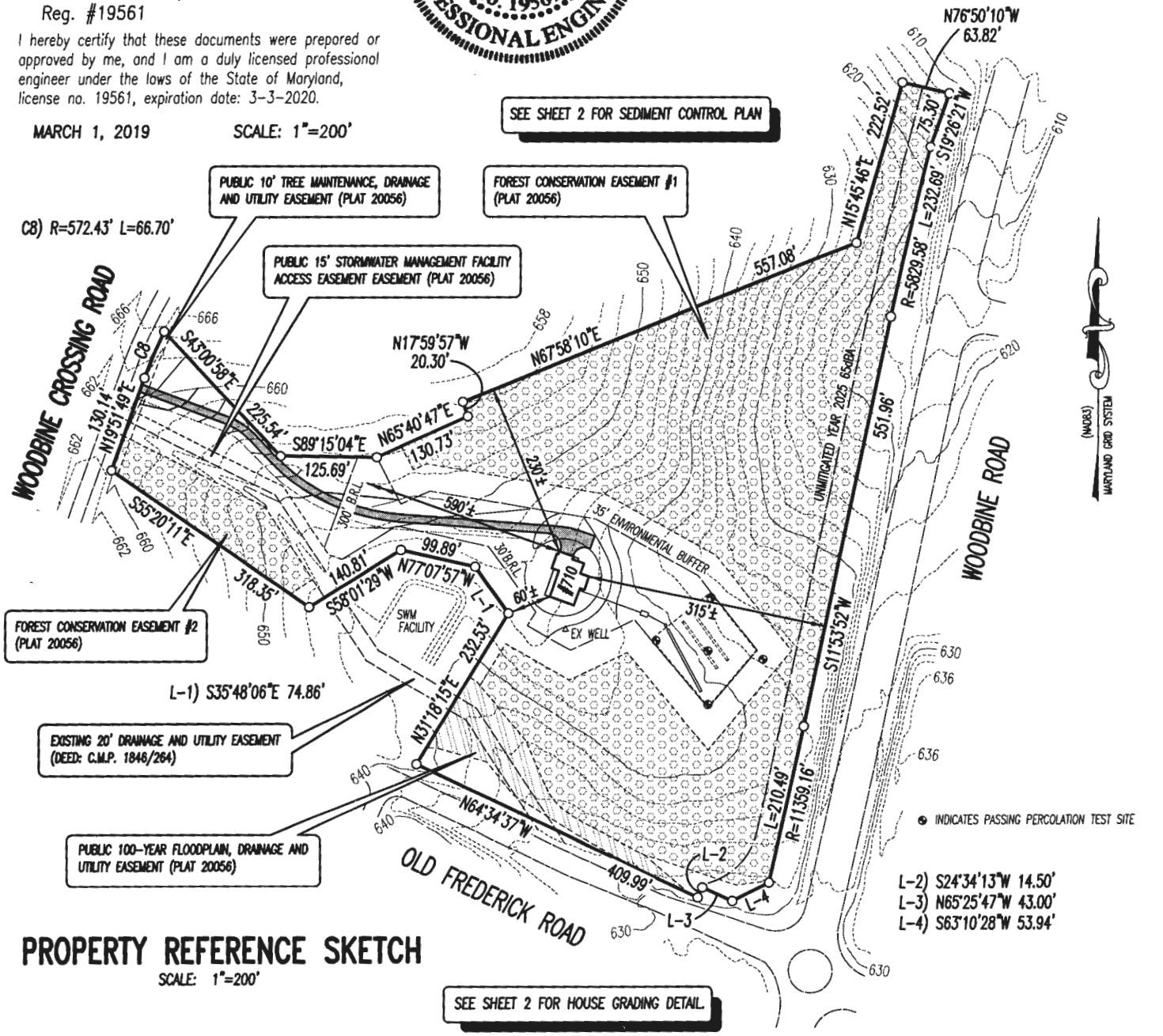
PROPERTY ZONING: RC-DEO - Rural Residential

STATE OF MARYLAND
PETER LEON PODOLAK
No. 19561
PROFESSIONAL ENGINEER

Peter L. Podolak, P.E.
Reg. #19561

I hereby certify that these documents were prepared or approved by me, and I am a duly licensed professional engineer under the laws of the State of Maryland, license no. 19561, expiration date: 3-3-2020.

MARCH 1, 2019 SCALE: 1"=200'



PROPERTY REFERENCE SKETCH
SCALE: 1"=200'

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WOODBINE CROSSING - PARCEL 'A' - Howard Co. Tax Map: 2 Grid: 24 Parcel: 253 Tax acct. no.: 04-374568
CURRENT TITLE REFERENCE: LDG, INC. DEED: C.M.P. 1988/258 PLAT: WOODBINE CROSSING - PARCEL 'A' PLAT NO. 20054-20056 10.0619 ACRES±

\\Job Files\Catonsville Homes\Woodbine Crossing\Plot-Grading Plan r1.dwg 3-1-2019

PERMIT NUMBER: B 90001591 DATE ACCEPTED:

RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4
www.howardcountymd.gov

BUILDING SITE ADDRESS *REQUIRED*

Street Address: 710 Woodbine Crossing Road			Unit:
City: Mount Airy	State: MD		Zip Code: 21771
Subdivision/Village/Complex Name: Woodbine Crossing		SDP/WP/BA #:	
Lot: A	Tax Map: 04 37 490	Parcel: A 253	Grading Permit #:

DESCRIPTION OF WORK *REQUIRED*

Existing Use: Rear Steps + Porch Proposed Use: Rear Yard Landscape Estimated Cost: $ 50,000

Trade Work to Be Completed *(Separate Permits Required)*: ☐ Mechanical (HVACR) ☑ Electrical ☐ Plumbing ☐ None

Permit For Two STEPS 18"x3'x7'
Permit For A MAJOR Pavilion 10'x14'

PROPERTY OWNER INFORMATION *REQUIRED*

Owner(s) Name(s) *(As it appears on tax records)*: Ryan Trighkevich			Primary Residence: ☑ Yes ☐ No
Owner's Street Address: 710 Woodbine Crossing Road			
City: Mount Airy	State: MD		Zip Code: 21771
Phone:	Email:		

APPLICANT NAME *REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION*

Business Name: HL Design Landscaping		Contact Name: David Howe	
Street Address: 7457 Waterville Road			
City: Mount Airy Cell 240 328 5187	State: MD		Zip Code: 21771
Phone: 301 829-9329	Email: hldlscaping@gmail.com		

CONTRACTOR INFORMATION *REQUIRED*

Business Name: HL Design			David Howe LLC
Licensee's Name: David Howe	License #:		117525
Street Address: 7457 Waterville Road			
City: Mount Airy	State: MD		Zip Code: 21771
Phone: 240 328 5187	Email: hldlscaping@gmail.com		

ARCHITECT/ENGINEER INFORMATION *INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE*

Business Name:	Name:		
Street Address:			
City:	State:		Zip Code:
Phone:	Email:		

BUILDING CHARACTERISTICS *REQUIRED*

Primary Structure: ☑ SF Dwelling ☐ SF Townhouse ☐ SF Duplex ☐ Mobile Home ☐ Multi-Family Dwelling (MF*) Condo: ☐ Yes ☐ No

Utilities: ☑ Electric ☑ Gas Water Supply: ☐ Public ☑ Private (Well) Sewage Disposal: ☐ Public ☑ Private (Septic)

Heating System: ☐ Electric ☑ Natural Gas ☐ Propane ☐ Other: Roadside Tree Project: ☐ No ☐ Yes: #

Sprinkler System: ☐ NFPA 13 ☐ NFPA 13R ☐ NFPA 13D ☐ None Fire Alarm System: ☐ Yes ☐ No ☐ Voice Evac

ADDITIONAL RESIDENTIAL INFORMATION *(PLEASE SELECT/COMPLETE ALL THAT APPLY)*

Model Name & Options:

# of Bedrooms (SF):	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):
# Rooms:	# Full Baths:	# Half Baths:	# Fireplaces:	

Garage/Carport Info: ☑ Attached Garage ☐ Detached Garage ☐ Integral Garage ☐ Carport ☐ None

Basement/Foundation Info: ☐ Slab on Grade ☐ Post & Pier ☐ Unfinished Basement ☐ Finished Basement: ☐ Full or ☐ Partial

1st Fl Width:	1st Fl Depth:	2nd Fl Width:	2nd Fl Depth:	Bsmt Width:	Bsmt Depth:

Energy Method: ☐ Prescriptive ☐ Performance ☐ UA Alternative ☐ ERI Gross Area: sq ft Occupiable Area: sq ft

AGREEMENT/ DISCLAIMER *REQUIRED*

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.

David Howe — 5-20-2020
APPLICANT'S ORIGINAL SIGNATURE — DATE SIGNED

FOR OFFICE USE ONLY *CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY*

AGENCIES REQUIRED/APPROVALS:

☐ PR _____	☐ DPZ _____	☑ DED _____	☐ Health 6/4/20 Henry Oswald	☐ CID

SUBMITTAL FEES:	PAYMENT:	ACCEPTED BY:

Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: _____

Permit No.: B1900 3972

Building Address: 710 WOODBINE CROSSING ROAD
City: MT AIRY State: MD Zip Code: 21771
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: PAR A
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: 10AC

Property Owner's Name: OPTIMUM PROPERTIES LLC
Address: 11175 STRAFIELD COURT
City: MARRIOTTSVILLE State: MD Zip Code: 21104
Phone: _____ Fax: _____
Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: APPLIED & APPROVED PERMITS
Address: PO BOX 310
City: PERRY HALL State: MD Zip Code: 21128
Phone: 443-610-7514 Fax: _____
Email: MICHELLE@APPLIEDANDAPPROVED.COM

Existing Use: SFD
Proposed Use: SFD W/TANK
Estimated Construction Cost: $ 4000
Description of Work: ~~UNDERGROUND~~
INSTALL A 1000 GAL PROPANE TANK

Occupant/Tenant Name: OWNER
Was tenant space previously occupied? ☐Yes ☐No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: TEVIS OIL
Contact Person: C NEVIN HAINES
Address: 1618 N MAIN STREET
City: HAMPSTEAD State: MD Zip Code: 21074
License No.: 468
Phone: 410-984-0399 Fax: _____
Email: propaneinquiry@tevispropane.com

Engineer/Architect Company: CONTRACTOR
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Commercial Building Characteristics	*Residential Building Characteristics*
Height:	☒ SF Dwelling ☐ SF Townhouse
No. of stories:	**Depth** **Width**
Gross area, sq. ft./floor:	1st floor:
	2nd floor:
Area of construction (sq. ft.):	Basement:
	☐ Finished Basement
Use group:	☐ Unfinished Basement
	☐ Crawl Space
Construction type:	☐ Slab on Grade
☐ Reinforced Concrete	No. of Bedrooms:
☐ Structural Steel	***Multi-family Dwelling***
☐ Masonry	*No. of efficiency units:*
☐ Wood Frame	No. of 1 BR units:
☐ State Certified Modular	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
➢ **Roadside Tree Project Permit**	Footings:
☐Yes ☒No	Roof:
Roadside Tree Project Permit #	☐ State Certified Modular
	☐ Manufactured Home

Utilities	
Electric: ☐ Yes ☐ No	
Gas: ☒ Yes ☐ No	
Water Supply	
☐ Public	
☒ Private	
Sewage Disposal	
☐ Public	
☒ Private	
Heating System	
☐ Electric ☐ Oil	
☐ Natural Gas ☐ Propane Gas	
☐ Other:	
Sprinkler System:	
☐ Yes ☐ No	
Grading Permit Number:	
Building Shell Permit Number:	

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Applicant's Signature

MICHELLE CLANCY
Print Name

MICHELLE@APPLIEDANDAPPROVED.COM
Email Address

11/18/19
Date

PERMITS
Title/Company

RECEIVED
NOV 19 2019
LICENSES & PERMITS DIVISION

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		
PSZA (Zoning)		
PSZA (Engineering)		
Health	12/10/19	

Is Sediment Control approval required for issuance? ☐ Yes ☐ No
☐ CONTINGENCY CONSTRUCTION START

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:

Filing Fee	$ NO
Permit Fee	$
Tech Fee	$
Excise Tax	$
PSFS	$
Guaranty Fund	$
Add'l per Fee	$
Total Fees	$
Sub- Total Paid	$
Balance Due	$
Check	#

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

J:\Operations\Updated Forms\Building applmp 03.21.2017.docx

COMPLETE THIS FORM WHEN DROPPING OFF ANY CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:

Date: 11/27/19

To: Ryan Rappaport
(Person's Name and Division)

From: Michelle Clancy 443 610 7514
(Your Name, Company Name and Telephone Number)

Subject: Project name _____

Project site address 710 Woodbine Crossing Rd

Permit # B1900 3972 **SDP #** _____

Other information pertinent to this project _____

✓ Please check the attachments below that you are submitting with this transmittal:

____ Letter of response to address plan review comment letter

____ Revised plans and/or revised details: When submitting for a complete **re-review, duplicate sets shall be submitted.**

____ Letter Summarizing Changes

____ Energy conservation calculations

✓ Copies of Site Plan Revised (be specific).

✓ Health Department Request ____ DPZ/ DED Request ____ Applicant's Request

____ Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or #_____

____ Other _____

Contact Person Information: (Required)

Michelle Clancy
Please Print Name

Telephone No: 443 610 7514

michelle@appliedandapproved.com
E-Mail Address: _____

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

Received by _____

RECEIVED
DEC - 2 2019
LICENSES & PERMITS DIVISION

- Health (RR) 12/10/19
- DPZ
- DED
- Plan Review

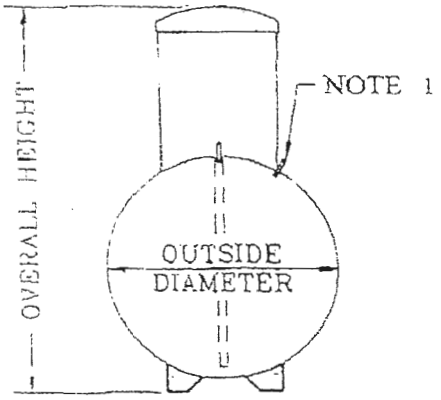
1st Rev. No fee

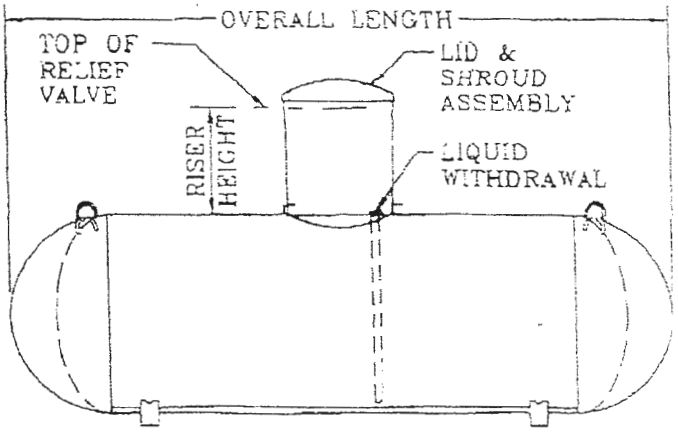
White-Plan Review / Yellow-Applicant / Pink-Permit Division
t:\Operations\Updated forms\transmit.frm - Rev. 04/2014

S43°00'58"E
660
225.54'
S89°15'04"E
125.69'
N17°59'57"W
20.30'
N67°58'10"E
658
N65°40'47"E
130.73'
Approved for UPT
B1900 3972
12/10/19
35' ENVIRONMENTAL BUFFER
300' B.R.L.
318.35'
650
140.81'
S58°01'29"W
99.89'
N77°07'57"W
30' B.R.L.
38'
#710
SWM
FACILITY
232.53'
N31°18'15"E
EX WELL
ALTERNATE
WELL
ALTERNATE
WELL
576
575
577
579
578
35°48'06"E 74.86'
EASEMENT
640
640
N64°34'37"W
DRAINAGE AND
OLD FREDERICK ROAD
409.99'
L-2
L-3
L-4
L=210.49'
R=11359.16'
630
S11°52'
PECIFICATIONS OF
ISAL SYSTEM
CE SKETCH
1" - 100'
REVISED
Date: 12-2-19
Comments: relocate tank
B1900 3972
Health: 12/10/19

TRINITY INDUSTRIES, INC.

Underground Vesse





General Specifications

Conforms to the latest edition and addenda of the ASME, Section VIII, div.1 code for Pressure Vessels. Complies with NFPA 58 and is listed by Underwriters Laboratories, Inc.

Rated at 250 psig from -20°F. to 125°F. All tanks may be evacuated to a full (14.7 psi) vacuum.

Vessel Finish: Coated with epoxy red powder.
Applicable federal, state or local regulations may contain specific requirements for protective coatings and cathodic protection. The purchaser and installer are responsible for compliance with such federal, state or local regulations.

All vessel dimensions are approximate

WATER CAPACITY	OUTSIDE DIAMETER	HEAD TYPE	OVERALL LENGTH	OVERALL HEIGHT Riser Height 14"	OVERALL HEIGHT Riser Height 28"	WEIGHT	QUANTITY IN FULL LOAD
120 wg 454.2 L	24" 609.6 mm	Ellip	5' - 5 7/8" 1671.6 mm	3' - 9 7/8" 1165.2 mm	4' - 8 3/8" 1431.9 mm	252 lbs. 114.3 kg	63
250 wg 946.3 L	31.5" 800.1 mm	Hemi	7'- 2 1/2" 2197.1 mm	4' - 5 3/8" 1355.7 mm	5' - 3 3/8" 1609.7 mm	472 lbs. 214.1 kg	42
320 wg 1211.2 L	31.5" 800.1 mm	Hemi	8' - 11 3/4" 2736.9 mm	4' - 5 3/8" 1355.7 mm	5' - 3 3/8" 1609.7 mm	588 lbs. 266.7 kg	35
500 wg 1892.5 L	37.42" 950.5 mm	Hemi	9' - 10" 2997.2 mm	4' - 11 3/8" 1506.6 mm	5' - 9 7/8" 1773.2 mm	921 lbs. 417.8 kg	25
1000 wg 3785.0 L	40.96" 1040.4 mm	Hemi	15' - 10 7/8" 4846.6 mm	5' - 2 7/8" 1597.0 mm	6' - 1 3/8" 1863.7 mm	1731 lbs. 785.2 kg	15
2000 wg 3785.6 L	46.614" 1183.9 mm	Ellip	23' - 9 3/8" 7248.5 mm	5' - 8 13/16" 1747.8 mm	6' - 7 5/16" 2014.5 mm	3685 lbs. 1671.4 kg	8

OPTIMUM PROPERTIES, LLC

11175 Stratfield Ct

Marriottsville, Md 21104

1/6/2020

To whom it may concern:

I wish to amend an existing Building Permit (B-19-000645) to add a partial finish basement to include a recreation room, full bath, play room, unfinished storage room, and unfinished mechanical room. ? WET BAR
Please see the attached drawing with approximate room dimensions.

The site location is:

Parcel A

710 Woodbine Crossing Rd

Mt Airy, Md 21771

Thank You for your assistance

Frank Potepan, Member

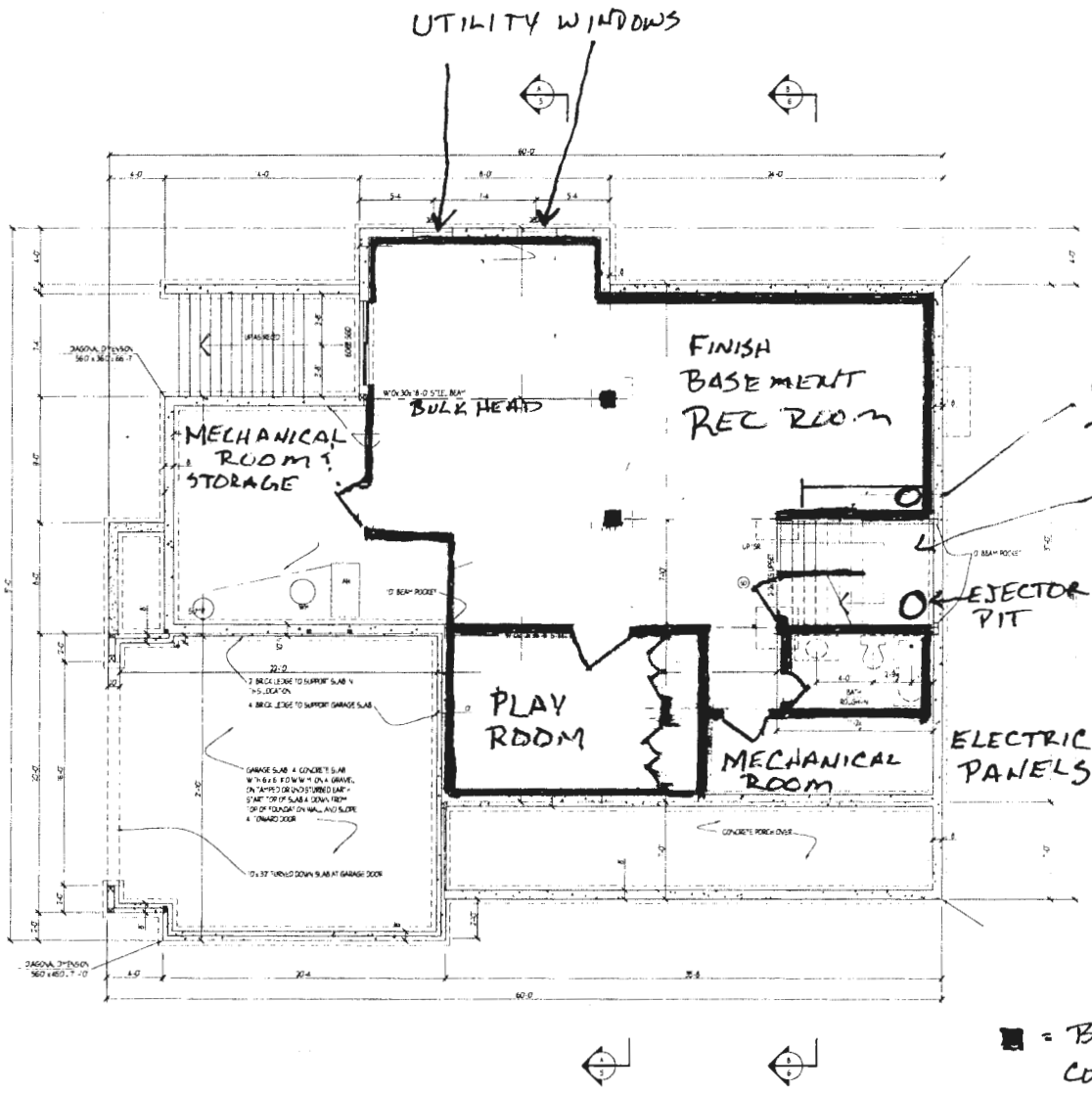
Optimum Properties, LLC

RECEIVED
JAN 08 2020
LICENSES & PERMITS
DIVISION

cc P12
Health

* Mail to Contractor once issued *
CK# 2440

REVISED
Date: 12/30/19
By: BIGOOD45
Comments: Amend to add partial finish basement, rec rm, 1F/B, playroom, unfin. storage, unfin. Mech. rooms, + wet bar



WOODBINE CROSSING PARCEL "A"

FINISH BASEMENT PLAN. 12/31/19

Drawing: BASEMENT / FOUNDATION PLAN
Project: OPTIMUM PROPERTIES
RIDGEFIELD
HOWARD COUNTY MD.
Notes:
Project No.: 2019A
Date: 2/19
Scale: 1/4" = 1'-0"
2

RESIDENTIAL DRIVEWAY ENTRANCE PER HOWARD COUNTY DETAIL R-6.06

C8) R=572.43' L=66.70'

INDICATES PROPOSED DRIVEWAY
INDICATES EX. GROUND CONTOUR LINE
INDICATES PROPOSED GRADING CONTOUR
INDICATES PROPOSED DRAINAGE FLOW ARROW
INDICATES PROPOSED SPOT GRADE ELEVATION
INDICATES LIMITS OF DISTURBANCE (TOTAL- 60,330 SQ.FT.)
INDICATES PASSING PERCOLATION TEST SITE

NOTE- SILT FENCE IS TO BE REPLACED WITH SUPER SILT FENCE AT THE DIRECTION OF THE CID INSPECTOR.

QUANTITATIVE AND QUALITATIVE STORM WATER MANAGEMENT WILL B ACHIEVED FOR THE HOUSE CONSTRUCTION BY DISCHARGING AND I ROOF LEADERS TO A STABILIZED FLOWPATH OF AT LEAST 75 FEET MORE THAN 5% SLOPE AS SHOWN. QUANTITATIVE AND QUALITATIVE WATER MANAGEMENT WILL BE ACHIEVED FOR THE PROPOSED DRIVI GRADING A 10'WD. GRASS SHOULDER AT A MAXIMUM CROSS SLOP ALONG THE LOWER SIDE OF THE DRIVEWAY.

FOREST CONSERVATION EASEMENT #1 (PLAT 20056)

TEMPORARY EARTH DIKE (SEE DETAIL ON SHEET 13)

TEMPORARY SILT FENCE (SEE DETAIL ON SHEET 1

PUBLIC 10' TREE MAINTENANCE, DRAINAGE AND UTILITY EASEMENT (PLAT 20056)

TEMPORARY STABILIZED CONSTRUCTION ENTRANCE (SEE DETAIL ON SHEET 10)

FOREST CONSERVATION EASEMENT #2 (PLAT 20056)

EXISTING 20' DRAINAGE AND UTILITY EASEMENT (DEED: C.M.P. 1846/264)

PUBLIC 15' STORMWATER MANAGEMENT FACILITY ACCESS EASEMENT EASEMENT (PLAT 20056)

35' ENVIRONMENTAL BUFFER

300' B.R.L.

30'B.R.L.

SWM FACILITY

EX WELL

GF 647.00
FF 648.00
BE 638.50

ROOF LEADER DISCHARGE 75LF @S=2.5%

1ST REPLACEMENT SYSTEM

2ND REPLACEMENT SYSTEM

INITIAL SYSTEM

(SEE SPECIFICATIONS ON SHEET 3 AND 4)

N19°51'49"E 130.14'

S55°20'11"E 318.35'

S58°01'29"W 140.81'

N77°07'57"W 99.89'

S35°48'06"E 74.86'

N31°18'15"E 232.53'

S89°15'04"E 125.69'

N65°40'47"E 130.73'

N17°59'57"W 20.30'

N67°58'10"E 557.08'

S43°00'58"E 225.54'

HOUSE GRADING DETAIL SEDIMENT CONTROL PLAN

SCALE: 1"=50'

#710 WOODBINE CROSSING ROAD
WOODBINE CROSSING - PARCEL 'A' - Howard Co. Tax Ma
CURRENT TITLE REFERENCE: LDG, INC. DEED: C.M.P. 1988/258 PLAT:
\\Job Files\Catonsville Homes\Woodbine Crossing\Plot-Grading Pla