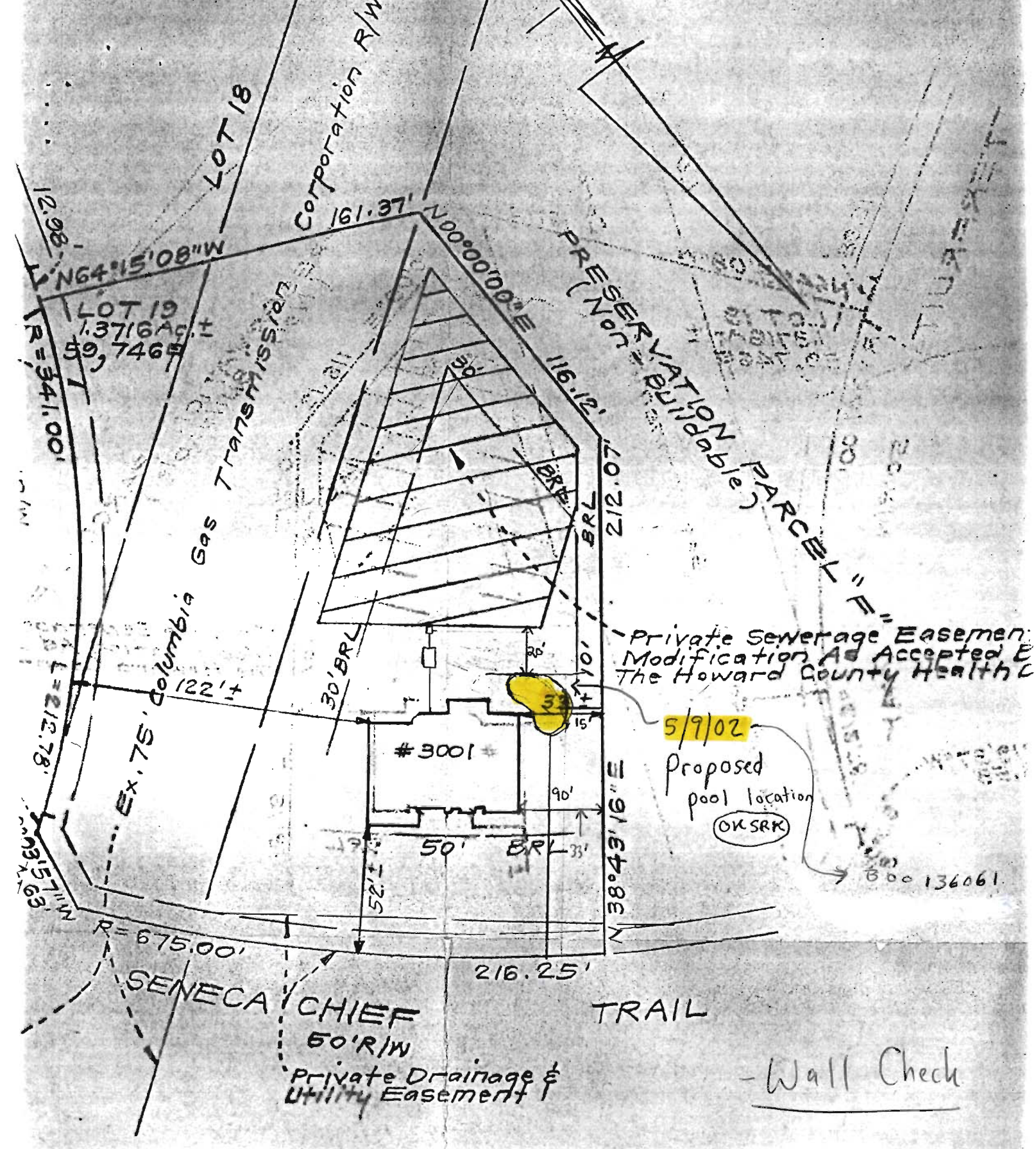
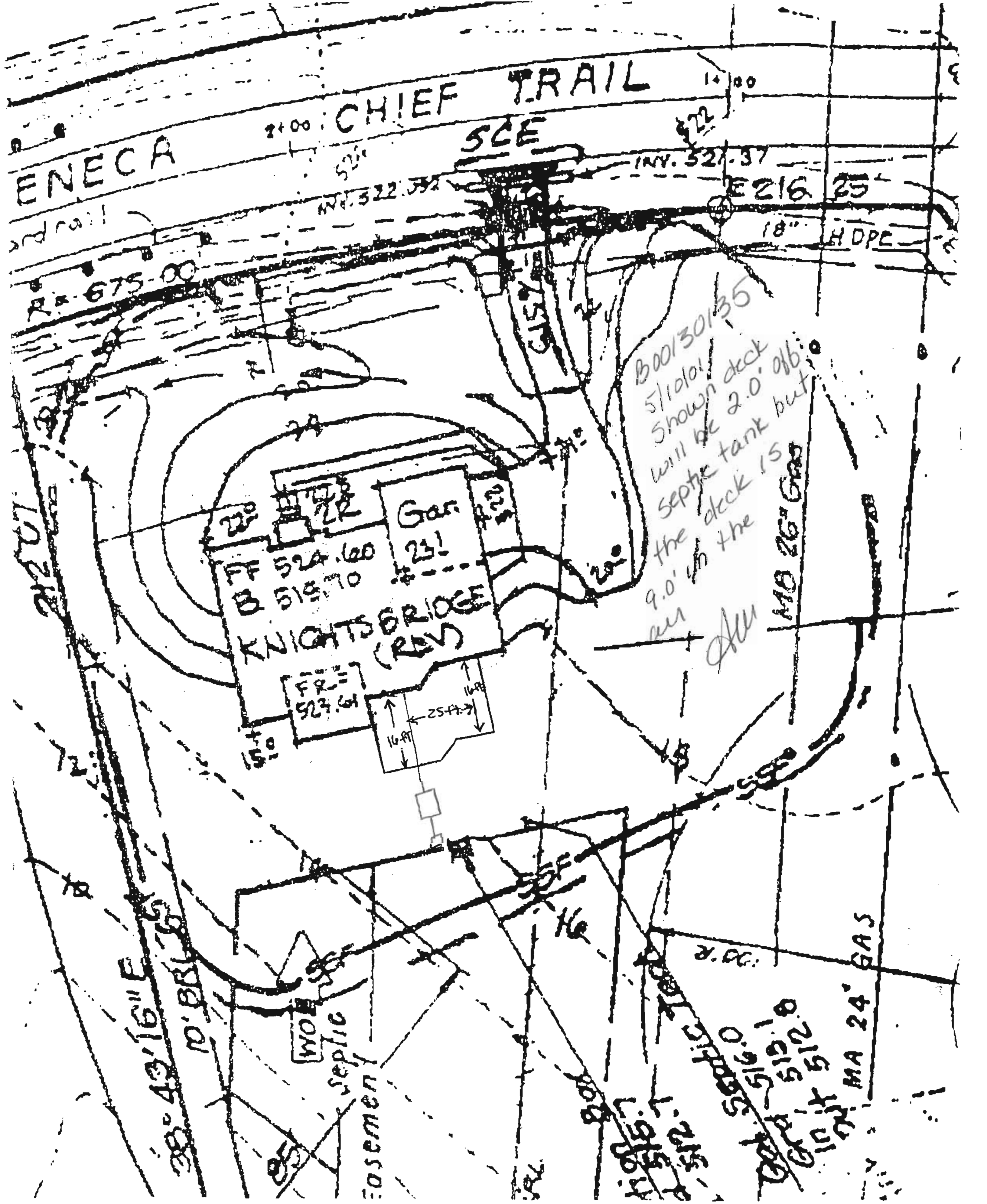

LOT 18
Corporation R/W
12.98'
N64°15'08"W
161.37'
N00°00'00"E
116.12'
PRESERVATION PARCEL "F"
(Non-Buildable)
LOT 19
1.3716Ac.±
59,746SF
R=341.00'
Columbia Gas Transmission
Ex. 75'
122'±
30' BRL
BRL
212.07'
Private Sewerage Easement
Modification As Accepted B
The Howard County Health D
5/9/02
Proposed
pool location
OK SRK
#3001
30'
10'
15'
90'
50'
BRL
33'
52'±
N38°43'16"E
216.25'
R=675.00'
S69°57'11"W
213.78'
SENECA CHIEF TRAIL
60' R/W
Private Drainage & Utility Easement
Boo 136061
-Wall Check
DO NOT DISCARD


SENECA CHIEF TRAIL
SCE
INV. 522.37
INV. 522.392
18" HDPE
R = 675.00
KNIGHTSBRIDGE (REV)
FF 524.60
B 519.70
Gar.
FR = 523.61
25 ft
16 ft
SSF
Septic
Easement
MA 24" GAS
MB 26" GAS
B00130135
5/10/01
Shown deck 2.0' o/b
will be septic tank but
the deck is
9.0' in the
air

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 B0012647

Building Address 3001 Seneca Chief Trail, Columbia, MD 21042

Suite/Apt. #: N/A SDP/WP/Petition #: SP00-160

Census Tract 6030 Subdivision Brantwood

Section 21 Area N/A Lot 19

Tax Map 18 Parcel 54 Grid 22

Zoning RCDEO Map Coordinates 11A6 Lot size **

Property Owner's Name NVHomes
Address 2200 Defense Hwy. Ste. 301
City Crofton State MD Zip Code 21114
Home Phone Work Phone 410-721-4703
Applicant's Name & Mailing Address, (if other than stated hereon):
Building Permit Services, Inc.
2602 Parallel Path
Abingdon, MD 21009
Phone 410-515-1717 Fax 410-515-2213

Existing Use Vacant Lot
Proposed Use SFD
Estimated Construction Cost $ 100,000.00
Description of Work Construct Knightsbridge
2 Sty. Full Bsmt. R.2FB.1HB.Garage.
(4BR) Opt.FP. F.L.L. w/ Bath
Plans on file

Contractor Company Owner
Contact Person Pat Orla - Agent
Address
City State Zip Code
License No.
Phone Fax

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
Height:	Water Supply: ___ Public ___ Private
No. of stories:	Sewage Disposal: ___ Public ___ Private
Gross area, sq. ft. per floor:	Electric Yes ☐ No ☐ Gas Yes ☐ No ☐
Use group:	Heating System: Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐
Construction type: ___ Reinforced Concrete ___ Structural Steel ___ Masonry ___ Wood Frame	Sprinkler system: N/A ☐ ___ Full ___ Partial ___ Other Suppression ___ # of Heads
___ State Certified Modular	

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics			Utilities
SF Dwelling ☐ SF Townhouse ☐	Depth	Width	Water Supply: ___ Public X Private
1st floor:	79'	36'	Sewage Disposal: ___ Public X Private
2nd floor:	64'	42'	Electric Yes ☐ No ☐ Gas Yes ☐ No ☐
Basement:	79'	42'	Heating System: Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐
Finished Basement ☐ Unfinished Basement ☐ Crawl space ☐ Slab on Grade ☐ No. of Bedrooms 4			Sprinkler system: N/A ☐ ___ NFPA #13D ___ NFPA #13R ___ Other:
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: 16 x 8 Roof: GSP/Gable			
___ State Certified Modular ___ Manufactured Home			

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* Frank & Patricia G. Orla

Building Permit Services, Inc. — 08-25-00

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
X Land Development, DPZ		
X State Highways		
X Building Official		
X Dev. Engineering, DPZ		
X Health	9/1/00	
Fire Protection		
X Is Sediment Control approval required prior to issuance? YES ☐ NO ☐		

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

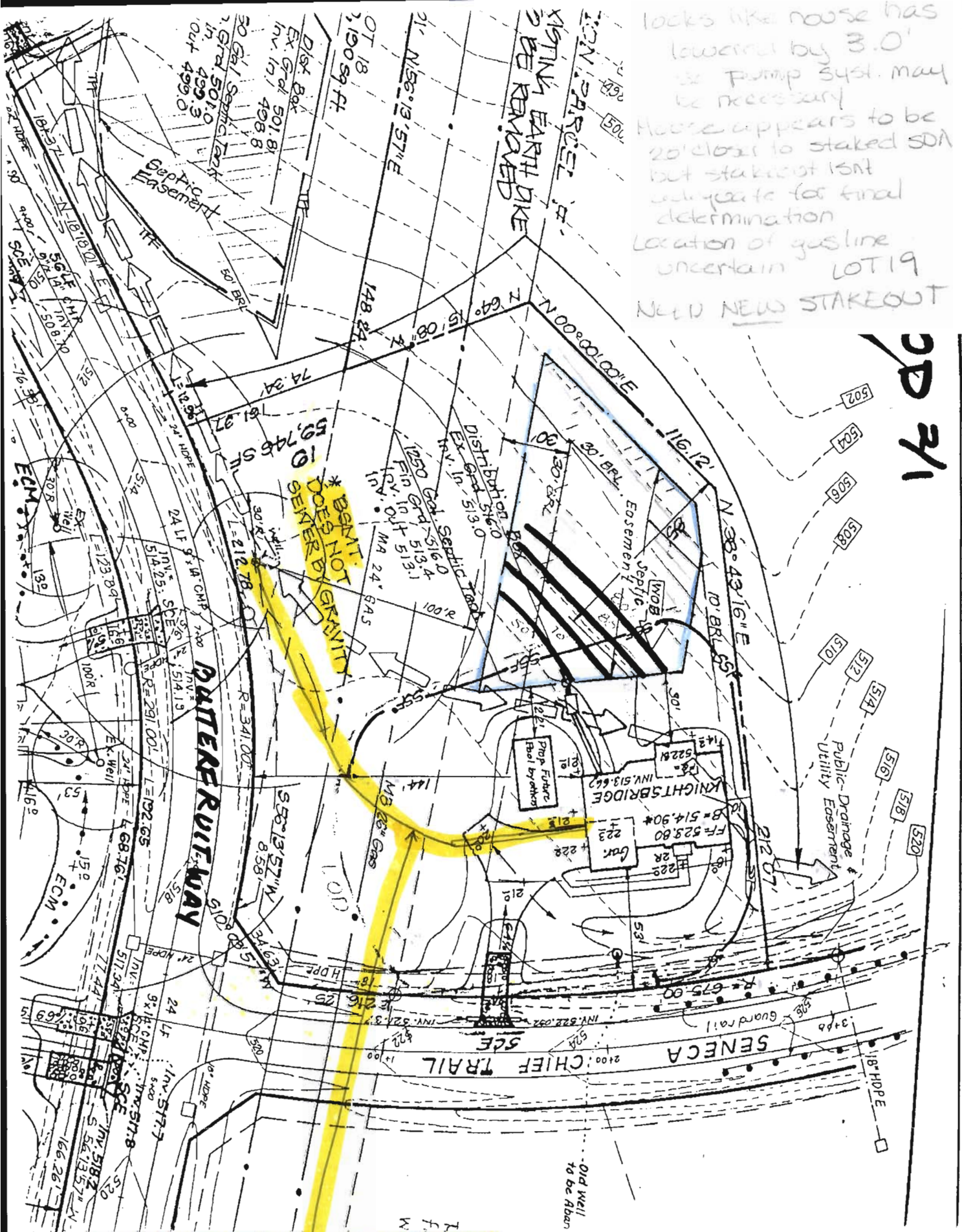
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? YES ☐ NO ☐
Is Entrance Permit required? YES ☐ NO ☐
Historic District? YES ☐ NO ☐
Lot Coverage for NewTown Zone
SDP/Red-line approval date Accepted by

PROPERTY ID#: 47349
Filing fee $ 25.00
Permit fee $
Excise tax $
Sub-total paid $
Add'l permit fee $
TOTAL FEES $
Balance due $
Check # 659484
Validation # 351827

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

a:\permit.frm

Rev. 10/15/91



possible well line location 10' from future pool (sleeved under driveway)

Total linear feet of trench required 280 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 4.5 feet

Depth of stone required below distribution pipe 1.5 feet

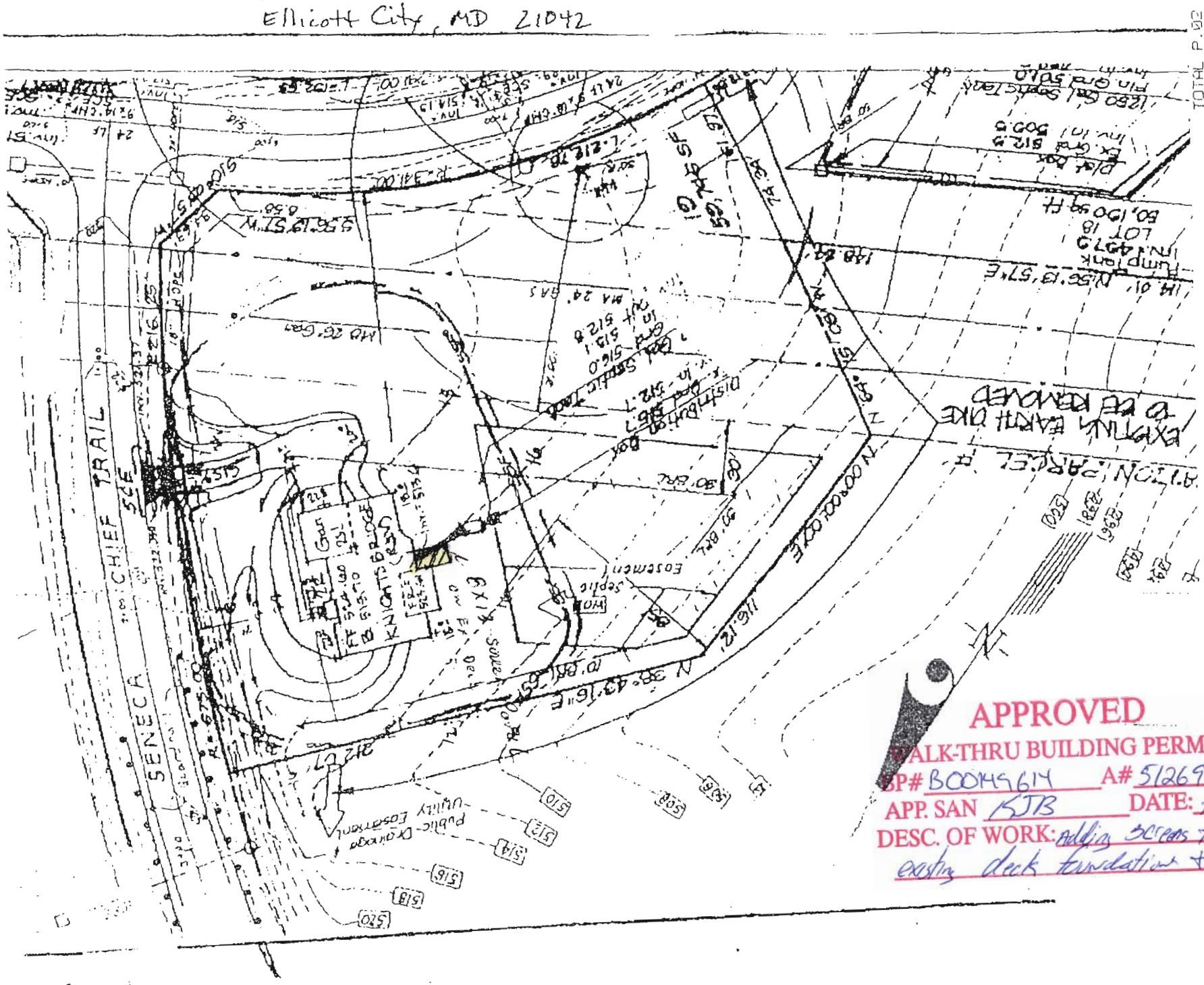
Approved Septic System Plan
Howard County Health Department

Signature

9/1/00
Date

3001 Seneca Chief Trail
Ellicott City, MD 21042

LOT: 19, Brantwood



APPROVED
WALK-THRU BUILDING PERMIT
BP# B00149614 A# 512694-T
APP. SAN KJB DATE: 7/28/04
DESC. OF WORK: adding screens to existing deck foundation + roof.