

11811

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410)313-2466 INSPECTIONS (410)313-1810 AUTOMATED INFORMATION (410)313-3800	<b>HOWARD COUNTY</b> <b>PERMIT APPLICATION</b>	<b>PERMIT NUMBER</b> <b>300131739</b>
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Building Address <u>11811 Sheppard's Crossing</u> <u>CLARKSVILLE 21021</u>	Property Owner's Name <u>David &amp; Marlene Campbell</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____	Address <u>8332 Cherry Brook Ct.</u>
Census Tract <u>10411</u> Subdivision <u>Chapel Woods II</u>	City <u>Lovell</u> State <u>MD</u> Zip Code <u>20723</u>
Section _____ Area _____ Lot <u>20</u>	Home Phone <u>301-715-6103</u> Work Phone <u>301-286-9343</u>
Tax Map <u>29</u> Parcel <u>86P</u> Grid <u>13</u>	Applicant's Name & Mailing Address, (if other than stated hereon): <u>Same</u>
Zoning <u>R-1</u> Map Coordinates <u>14F3</u> Lot size <u>3.797 Ac.</u>	Phone _____ Fax <u>413-604-2194</u>
Existing Use <u>VACANT</u>	Contractor Company <u>Richstone Custom Homes</u>
Proposed Use <u>S.F.D.</u>	Contact Person <u>Richard S. Livingston</u>
Estimated Construction Cost \$ <u>650,000.-</u>	Address <u>10800 BARBER RD.</u>
Description of Work <u>Construct Custom SFD, SBR,</u> <u>5BA, 2PR, PARTIAL FIN. BSMT, 3 CAR GAR, 2 porches</u> <u>FP's,</u>	City <u>Owings Mills</u> State <u>MD</u> Zip Code <u>21117</u>
Occupant or Tenant _____	License No. <u>MH32 192</u>
Contact Name _____	Phone <u>410-581-2925</u> <u>9809/410-581-2979</u>
Address _____	Engineer or Architect Company <u>DW Taylor Assoc.</u>
City _____ State _____ Zip Code _____	Contact Person <u>Mike Hammett</u>
Phone _____ Fax _____	Address _____
	City _____ State _____ Zip Code _____
	Phone <u>410-964-1181</u> Fax <u>410-997-2921</u>

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: _____	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____
No. of stories: _____	Public <input type="checkbox"/> Private <input type="checkbox"/>	Depth _____ Width _____	Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: _____	Sewage Disposal: _____	1st floor: _____	Sewage Disposal: _____
Use group: _____	Public <input type="checkbox"/> Private <input type="checkbox"/>	2nd floor: _____	Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
Construction type: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	Basement: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Reinforced Concrete <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Structural Steel <input type="checkbox"/>	Heating System: _____	Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: _____
Masonry <input type="checkbox"/>	Electric <input type="checkbox"/> Oil <input type="checkbox"/>	No. of Bedrooms <u>5</u>	Electric <input type="checkbox"/> Oil <input type="checkbox"/>
Wood Frame <input type="checkbox"/>	Natural Gas <input type="checkbox"/>	Multi-family dwellings: _____	Natural Gas <input checked="" type="checkbox"/>
State Certified Modular <input type="checkbox"/>	Propane Gas <input type="checkbox"/>	No. of efficiency units: _____	Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/>	No. of 1 BR units: _____	Sprinkler system: N/A <input checked="" type="checkbox"/>
	Full <input type="checkbox"/>	No. of 2 BR units: _____	Other Structure: _____
	Partial <input type="checkbox"/>	No. of 3 BR units: _____	Dimensions: _____
	Other Suppression <input type="checkbox"/>	Footings: _____	Roof: _____
	# of Heads _____	State Certified Modular <input type="checkbox"/>	Manufactured Home <input type="checkbox"/>

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 <u>Richard S. Livingston</u>	Print Name <u>Richard S. Livingston</u>
Title/Company <u>Richstone Custom Homes</u>	Date <u>7/31/01</u>

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#
<input checked="" type="checkbox"/> Land Development, DPZ			Front: _____	51718
<input checked="" type="checkbox"/> State Highways			Rear: _____	Filing fee \$ <u>100.00</u>
<input checked="" type="checkbox"/> Building Official			Side: _____	Permit fee \$ _____
<input checked="" type="checkbox"/> Dev. Engineering, DPZ			Side St.: _____	Excise tax \$ _____
<input checked="" type="checkbox"/> Health	<u>9/7/01</u>	<u>Mark R. L...</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
<input checked="" type="checkbox"/> Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Balance due \$ _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Check # <u>2303</u>
			Accepted by <u>[Signature]</u>	Validation # <u>41230</u>

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

Rev. 10/15/98



**DEPARTMENT OF PLANNING & ZONING**

*Joseph W. Rutter, Jr., Director*

March 6, 2002

Mr. and Mrs. David Campbell  
8332 Cherrybrook Court  
Laurel, MD 20723

**RE: Address Change**

Dear Mr. and Mrs. Campbell:

The purpose of this letter is to notify you regarding the correct street address for your property in accordance with the Howard County Street Address Grid System.

At your request, and with concurrence of Richard Jordan, the County's address coordinator in 9-1-1, your address is being changed as follows:

<b>OLD/INCORRECT ADDRESS:</b>	11813 Shepards Crossing
<b>NEW/CORRECTED ADDRESS:</b>	11811 Shepards Crossing Map 29, Grid 13, Parcel 86, Lot 20 Licenses & Permits Property ID # 51718

*Corrected  
in wall log  
Hpts*

*Chapel Woods II Lot 20*

This address change is effective **upon receipt** of this letter. The Department of Planning and Zoning will notify the agencies as copied below.

It is essential that you use the "corrected address" so that emergency response of fire, police and medical services to your location will not be inhibited. The County bases responses according to street addresses.

(over)

In accordance with Section 16.400 of the Howard County Code, "Street Names and House Numbers," all buildings (commercial and residential) must have the correct street address displayed in a conspicuous place over or near the principal entrance. The numbers must be easily legible figures not less than two inches (2") high and in a color contrasting with their background. The Department of Fire & Rescue Services recommends reflective numbers.

If you have any questions, please contact Richard Jordan at (410) 313-3425, or e-mail him at [rjordan@co.ho.md.us](mailto:rjordan@co.ho.md.us).

Sincerely,



L. Kent Sheubrooks  
Division of Land Development

LKS: RIJ: j

File: 11811 Shepards Crossing

**CERTIFIED MAIL / RECEIPT REQUESTED**

cc: Department of Finance, Water Billing  
Department of Fire & Rescue Services  
Tax Assessments  
Department of Inspections, Licenses and Permits  
Inspections Enforcement - Brenda Saucedo  
Health Department  
Election Board  
DPZ - Graphics - Mike White  
DPZ - Research  
DPZ - Derrick Jones  
DPZ - Development Engineering Div., Land Dev.  
GIS - John Bussiere

Postmaster, Clarksville MD 21029-9998  
Verizon  
Baltimore Gas & Electric

2002 MR - 7 PM 4:06  
RECEIVED  
HOWARD COUNTY HEALTH DEPT.  
ENVIRONMENTAL HEALTH