

G00009591

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLCOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION		PERMIT NUMBER B09-000295	
Building Address <u>10907 Tompkins Way</u> <u>WOODSTOCK 21163</u>			Property Owner's Name <u>Trinity Quality Home Inc</u>		
Suite/Apt. #: _____ SDP/WP/Petition #: <u>GP-06-09</u>			Address <u>3675 Park Ave #301</u>		
Census Tract <u>6030</u> Subdivision <u>Preserve at Glen</u>			City <u>Ellicott City</u> State <u>MD</u> Zip Code <u>21043</u>		
Section _____ Area _____ Lot <u>2</u>			Home Phone _____ Work Phone <u>410-313-8722</u>		
Tax Map <u>31</u> Parcel <u>226</u> Grid <u>23</u>			Applicant's Name & Mailing Address, (if other than stated hereon):		
Zoning <u>RCD4P</u> Map Coordinates <u>6B13</u> Lot size <u>1.21 AC</u>			Phone _____ Fax <u>410-313-8731</u>		
Existing Use <u>VACANT LOT</u>			Contractor Company <u>TRINITY QUALITY HOMES INC</u>		
Proposed Use <u>SFD</u>			Contact Person <u>SALLY HODGEL</u>		
Estimated Construction Cost \$ <u>457,800</u>			Address <u>3675 PARK AVE #301</u>		
Description of Work <u>BLKSHAL - 2 STORY</u> <u>FULL BSMT, 11R, 6TB, 2FP</u> <u>CARPGL (5BR) FINISHED</u> <u>BSMT W/BATH</u>			City <u>ELLCOTT CITY</u> State <u>MD</u> Zip Code <u>21043</u>		
Occupant or Tenant <u>N/A</u>			License No. <u>699</u>		
Contact Name _____			Phone <u>410-313-8722</u> Fax <u>410-313-5731</u>		
Address _____			Engineer or Architect Company <u>N/A</u>		
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 checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	1st floor: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
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 checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>5</u> Height: _____ Multi-family dwellings: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
		Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ 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.

Sally L. Hodge  
Applicant's Signature  
VP, OPERATIONS - TRINITY  
Title/Company

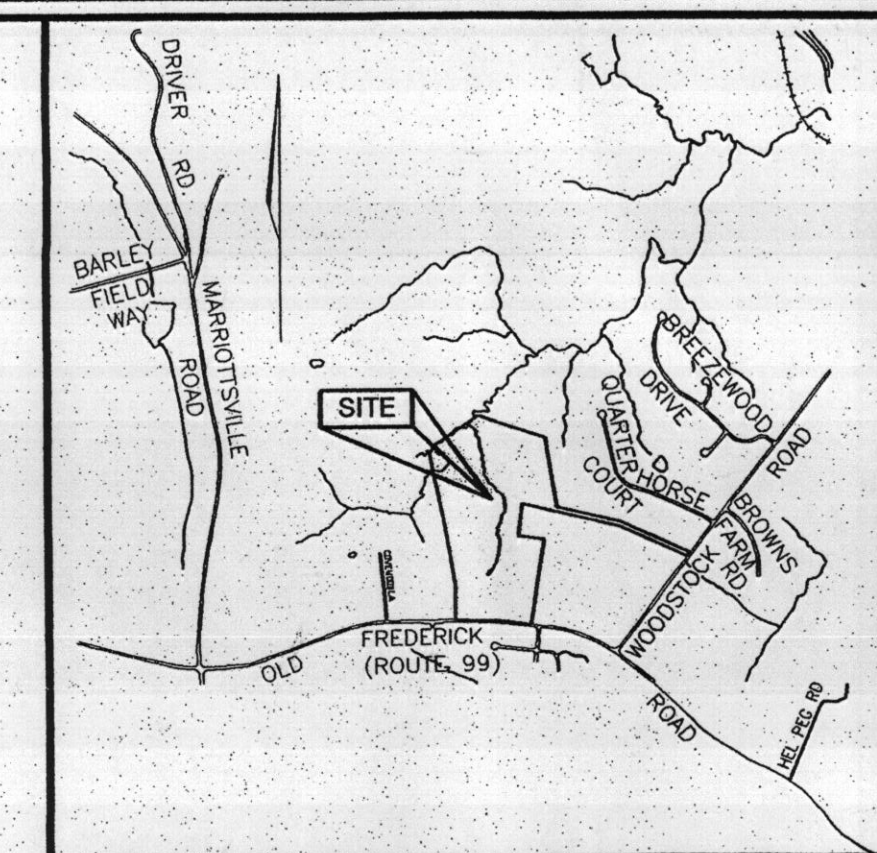
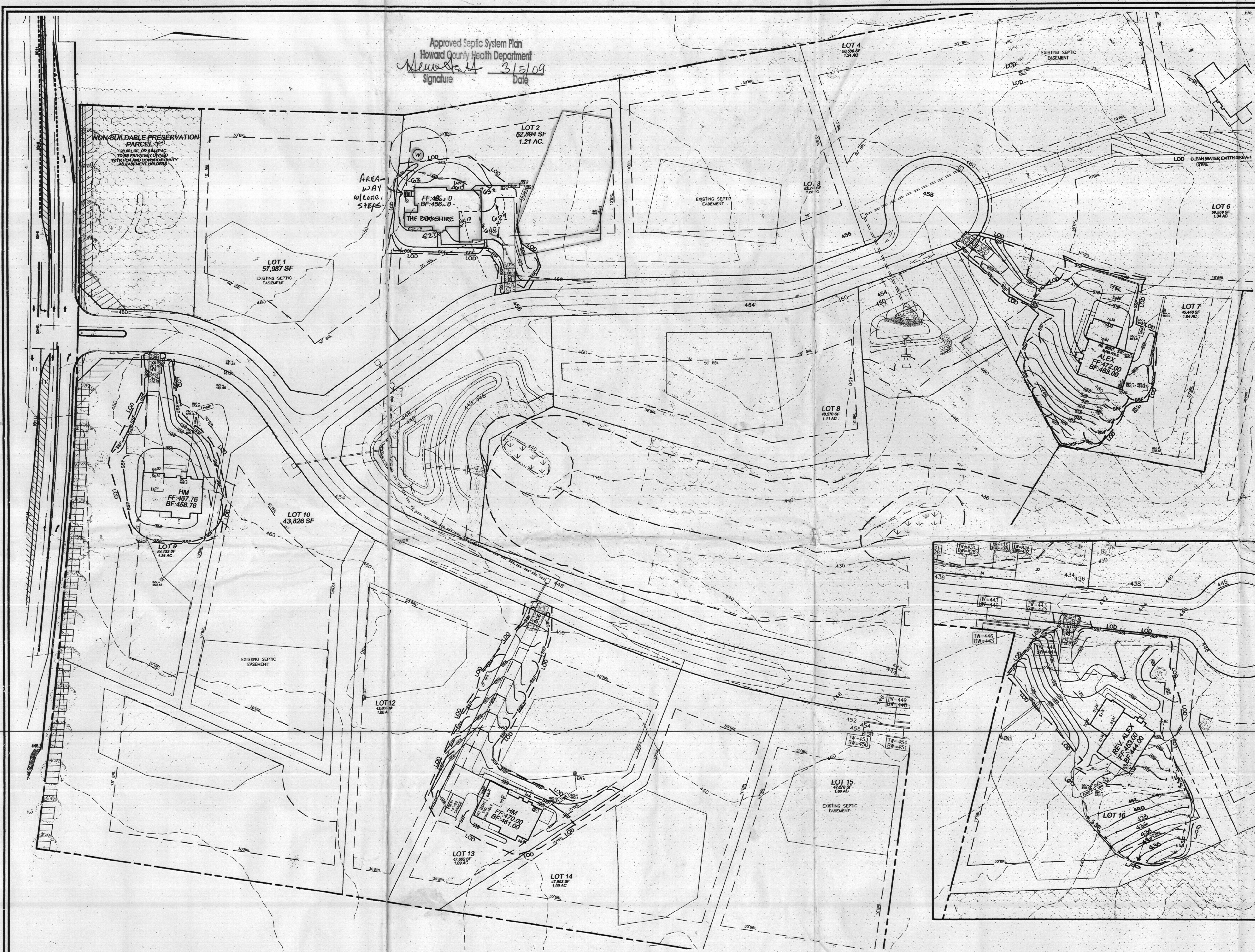
SALLY HODGEL  
Print Name  
2/24/09  
Date

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>3/25/09</u>	<u>Steve Frost</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 # <u>10297</u>
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:			Lot Coverage for NewTown Zone _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ			Yellow: DED, DPZ	
Pink: Health			Gold: SHA	
T: \norm\PERMIT.FRM				

Rev. 11/4/04





VICINITY MAP  
SCALE: 1"=2000'

LEGEND

---	EXISTING 2 FT CONTOUR
---	EXISTING 10 FT CONTOUR
---	LIMIT OF DISTURBANCE
---	SUPER SILT FENCE
---	EXISTING TREELINE

NOTE: NO STOCKPILING WILL BE PERMITTED ON SITE.

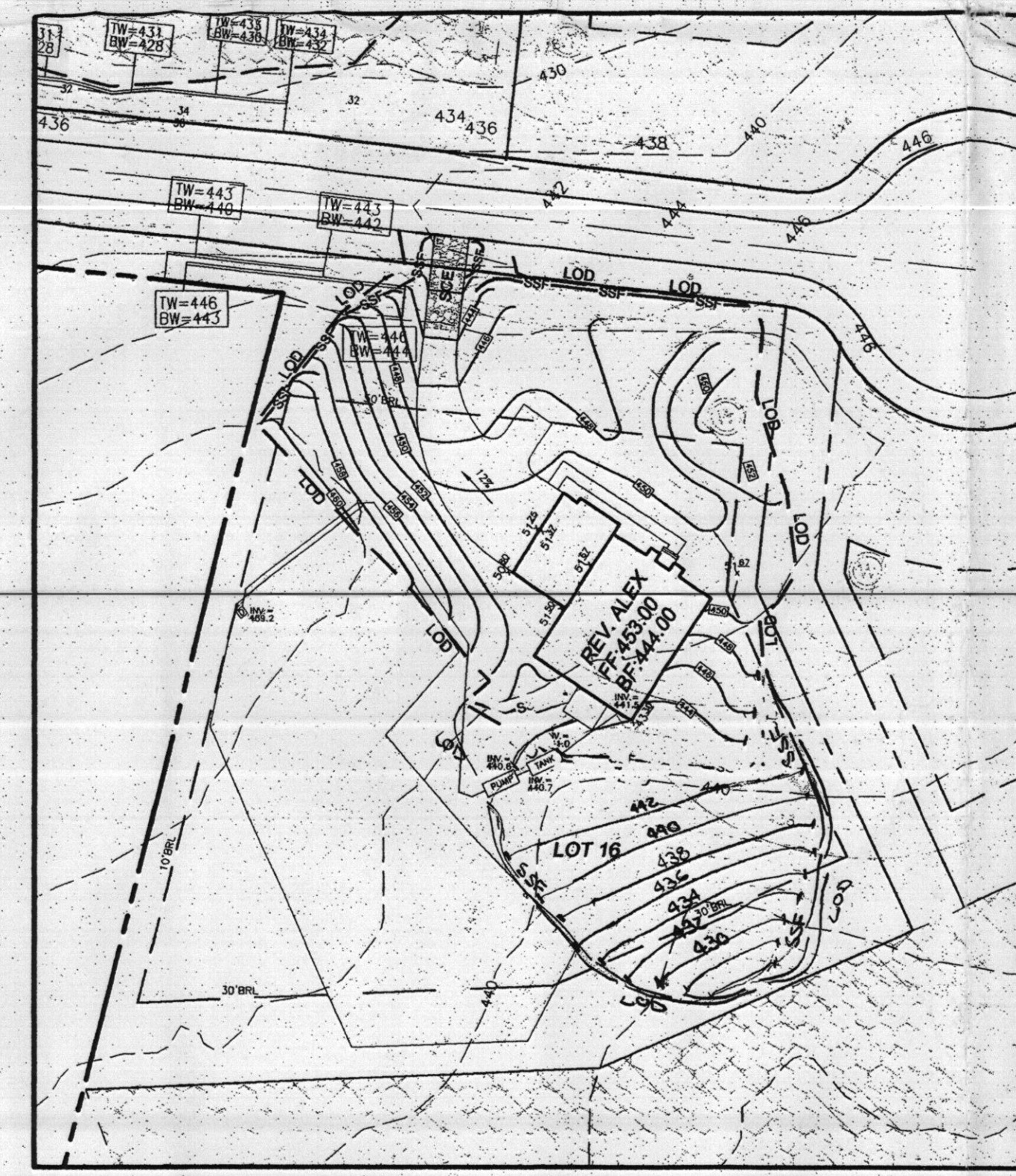
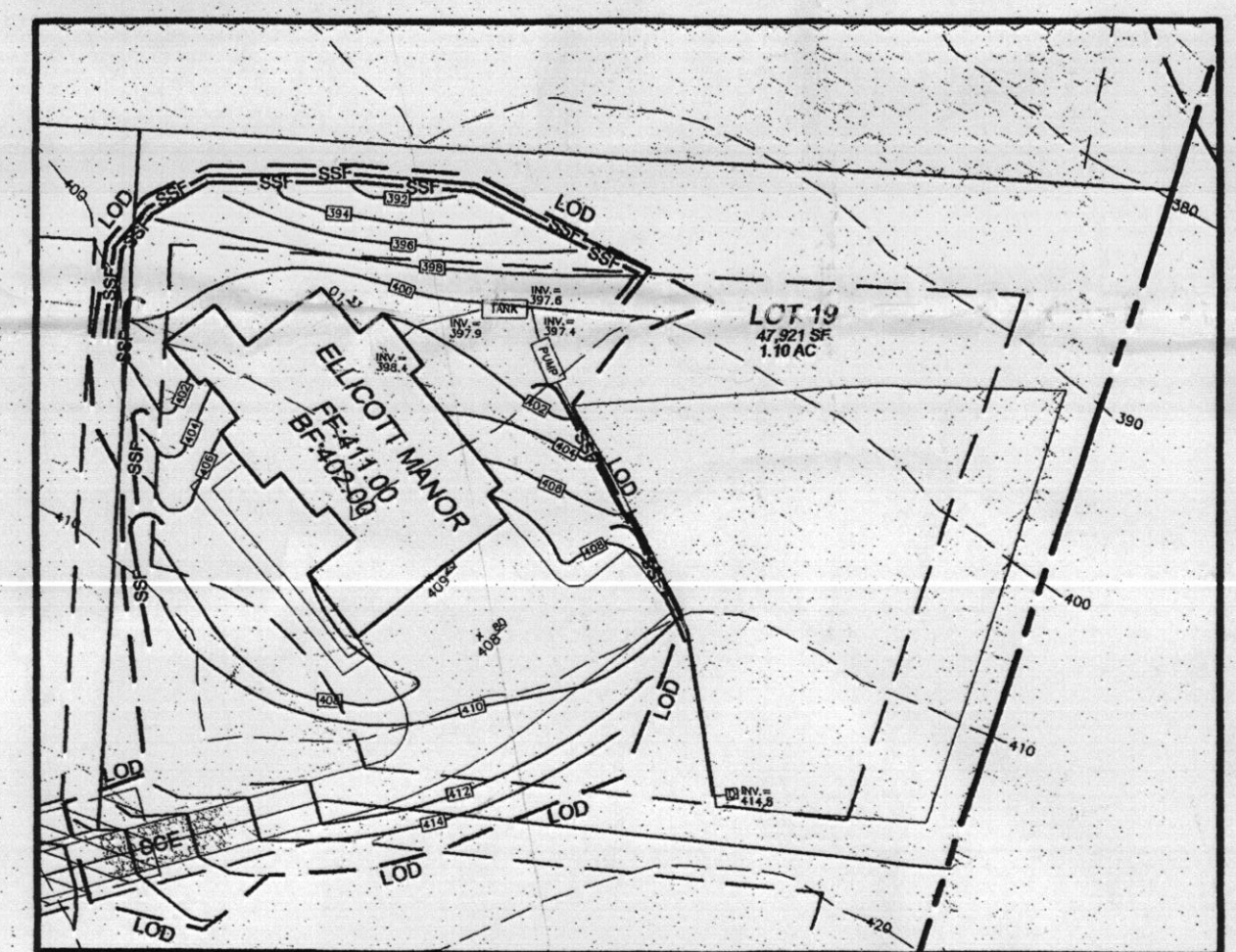
THE EXISTING WELL SHOWN ON LOT 2 TAG NO. 10-21-3873 HAS BEEN FIELD LOCATED BY ROBERT H. VOGEL ENGINEERING, INC.

BUILDING OF LOT 2 FLOOR AREAS:

BASEMENT FLOOR AREA: 2500

FIRST FLOOR AREA: 2625

SECOND FLOOR AREA: 2625



1	EXPAND GRADING LOT 16	2/1/07
NO.	REVISION	DATE

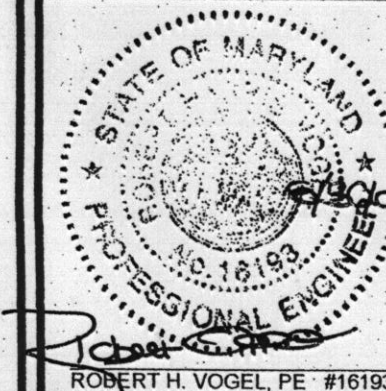
GRADING AND SEDIMENT EROSION CONTROL PLAN  
THE PRESERVE AT WAVERLY GLEN  
BUILDING PERMIT # BD9000585  
LOTS 2, 7, 9, 13, 16 AND 19

REF: S-01-06, P-02-27, F-04-74  
WP-03-07

TAX MAP: 31 BLOCK: 21  
1ST ELECTION DISTRICT

PARCEL 226  
HOWARD COUNTY, MARYLAND

**ROBERT H. VOGEL ENGINEERING, INC.**  
ENGINEERS • SURVEYORS • PLANNERS  
8407 MAIN STREET  
ELLICOTT CITY, MD 21043  
TEL: 410.461.7666  
FAX: 410.461.5951



DESIGN BY:	LJT
DRAWN BY:	LJT
CHECKED BY:	RHV
DATE:	MAY 2005
SCALE:	1"=50'
W.O. NO.:	05-01.00

REVIEWED FOR HOWARD SCD AND MEETS TECHNICAL REQUIREMENTS

*Jim Meyer* 9-1-05  
DATE

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT

*John H. Rhinow* 9-1-05  
DATE

ENGINEERS' CERTIFICATE

"I CERTIFY THAT THIS PLAN FOR SEDIMENT AND EROSION CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT."

*Robert H. Vogel* 8/30/05  
DATE

ROBERT H. VOGEL, PE #16193

DEVELOPER'S CERTIFICATE

"I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN FOR SEDIMENT AND EROSION CONTROL, AND THAT ALL RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HOWARD SOIL CONSERVATION DISTRICT."

*Michael L. Pfaltz* 8/29/05  
DATE

MICHAEL L. PFALTZ

PLAN  
SCALE: 1"=50'

OWNER / DEVELOPER

THE PRESERVE AT WAVERLY GLEN, LLC  
3675 PARK AVENUE, SUITE 301  
ELLICOTT CITY, MARYLAND 21043  
(410) 480-0023