

14392 TRIADELPHIA ROAD

DEPT. 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		B09000590 PERMIT NUMBER	
Building Address <u>14392 Triadelphia Rd</u> <u>Glenely, MD 21737</u>			Property Owner's Name <u>NVR Inc</u> Address <u>6085 Marshalee Dr</u> City <u>Elkridge</u> State <u>MD</u> Zip Code <u>21075</u> Phone <u>410-319-9156</u> Phone _____ Applicant's Name & Mailing Address, (if other than stated herein): _____		
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot <u>4</u> Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot Size _____			Phone _____ Fax _____		
Existing Use <u>SFH</u> Proposed Use <u>SFH w/ Deck</u> Estimated Construction Cost \$ <u>9,000</u> Description of Work <u>Construct approx. 16x8 deck w/ steps to grade.</u>			Contractor Company <u>Probuilt Construction, Inc</u> Contact Person <u>Edward Racykowski</u> Address <u>13320 Clarksville Pike</u> City <u>Highland</u> State <u>Md</u> Zip Code <u>21077</u> License No. <u>30247</u> Phone <u>301-854-0821</u> Fax <u>301-251-9632</u>		
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 DESCRIPTION - RESIDENTIAL	
Building Characteristics Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Utilities Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads	Building Characteristics SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 st floor: _____ 2 nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ 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: <u>250x250 PILES</u> Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Utilities Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> 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.

[Signature]
 Applicant's Signature
President
 Title/Company

Edward Racykowski
 Print Name
5/31/09
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
****PLEASE WRITE NEATLY AND LEGIBLY.****
- FOR OFFICE USE ONLY -

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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 _____		

Distribution of Copies: White - Building Official; Green - LDD, DPZ; Yellow - DED, DPZ; Pink - Health; Gold - SHA
 Form/bldg/perm/apply/10/23/04

APPROVED FOR CONSTRUCTION

P3

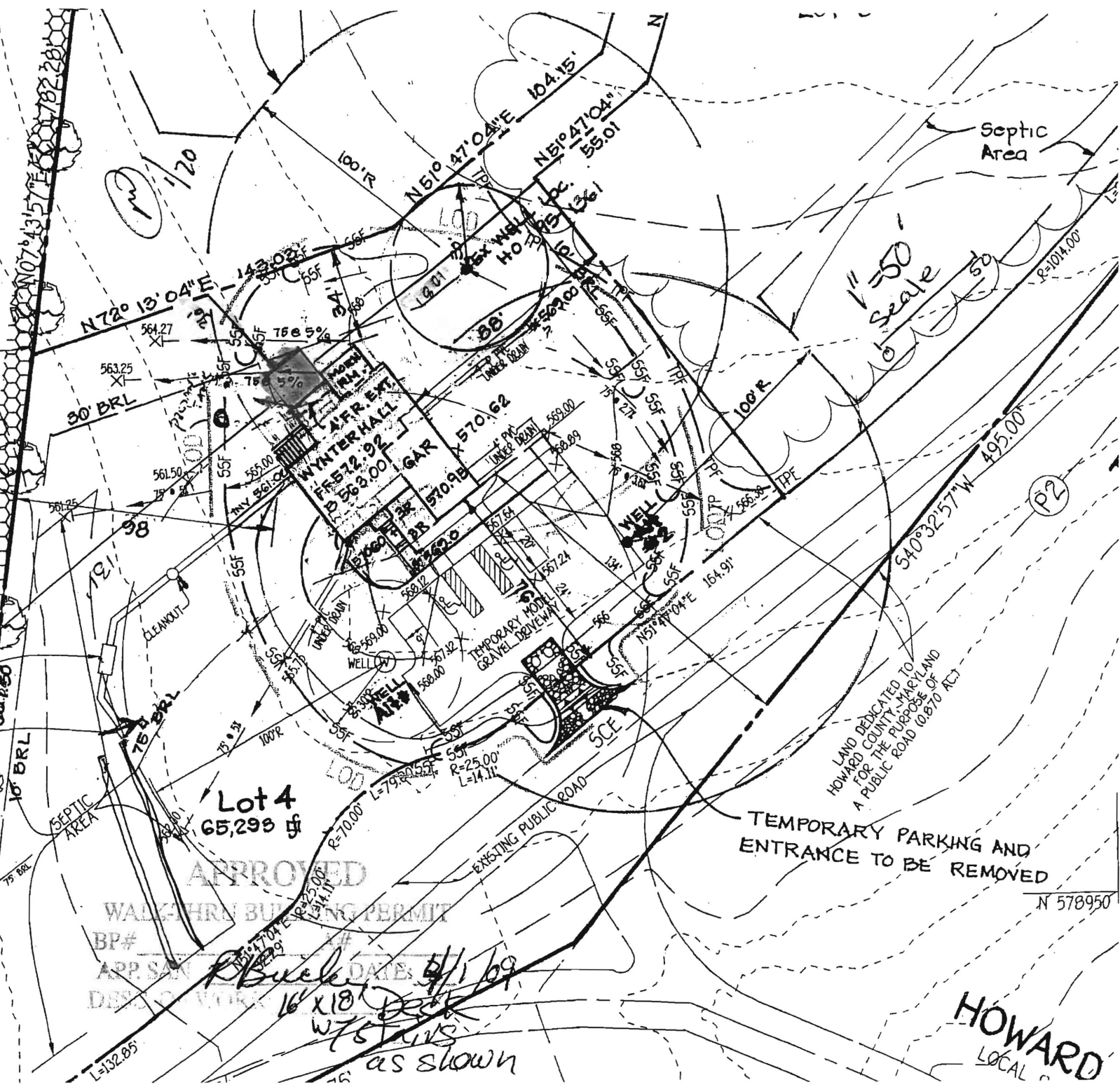
EXISTING NATURAL AREA CONSERVATION
STORMWATER MANAGEMENT CREDIT
PLAT NO. 17234

GAL. SEPTIC TANK
N 559.10
OUT 558.80

BOX
X. GRD. 561.50
IV. IN 558.50

78950

ING



Septic Area

1" = 50' scale

P2

LAND DEDICATED TO
HOWARD COUNTY, MARYLAND
FOR THE PURPOSE OF
A PUBLIC ROAD (0.870 AC)

TEMPORARY PARKING AND
ENTRANCE TO BE REMOVED

N 578950

HOWARD
LOCAL

APPROVED
WALK-THRU BUILDING PERMIT
BP#
APP. SAN
DATE: 4/1/09
DESIGN WORK
as shown

607-043

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELICOTT CITY, MD 21043
PERMITS (410) 313-2155 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B080-1030

Building Address 14392 Tridolphia RD
Elkridge MD 21075
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision Warfield
Section _____ Area _____ Lot 8004
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name NVR Inc
Address 6085 Manabala Dr S-130
City Elkridge State MD Zip Code 21075
Home Phone _____ Work Phone 410 379 5956
Applicant's Name & Mailing Address, (if other than stated hereon):
Jim Kerwin PO Box 552
Warfield MD 21075
Phone 443-309 7792 Fax 410 489 0550

Existing Use Vacant lot
Proposed Use Single family home (Model Home)
Estimated Construction Cost \$ 350,000
Description of Work New 2 story "MT. Vernon"
with 2 car side garage and 1 car
port load garage, morning room
finished basement and side office (temp)
Occupant or Tenant in garage
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Contractor Company NVR Home
Contact Person MATT ATWELL
Address 6085 Manabala Dr S-130
City Elkridge State MD Zip Code 21075
License No. SL
Phone 410 379 5956 Fax 410 379 2430
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 <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"/>
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 _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
1st floor: _____	Sewage Disposal: _____ Public _____ Private _____
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u> Height: <u>25</u> Multi-family dwellings: _____ No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: N/A <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ State Certified Modular _____ Manufactured Home _____	

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Jim Kerwin
Applicant's Signature
Director NVR Home
Title/Company

Jim Kerwin
Print Name
4/10/08
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

** PLEASE WRITE NEATLY AND LEGIBLY. **

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>11/13/08</u>	<u>[Signature]</u>
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met?	TOTAL FEES \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
Historic District?	Validation # _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	
Lot Coverage for NewTown Zone _____	
SDP/Red-line approval date _____	

Accepted by _____

Distribution of Copies-

White: Building Official

Green: LDD, DPZ

Yellow: DED, DPZ

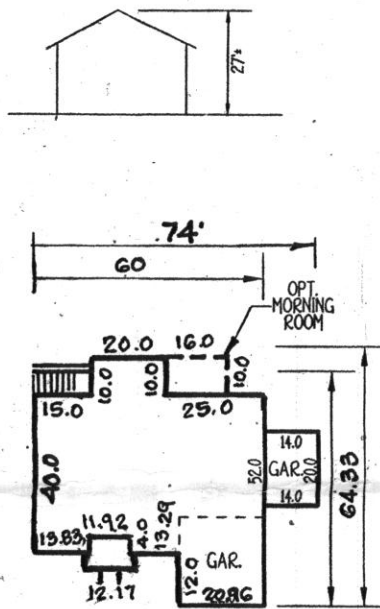
Pink: Health

Gold: SHA

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Rev. 11/4/04

LEGEND	
SYMBOL	DESCRIPTION
---	EXISTING CONTOUR 2' INTERVAL
- - -	PROPOSED CONTOUR 2' INTERVAL
+362.5	SPOT ELEVATION
---TPF---	TREE PROTECTION FENCE
---SFF---	SUPER SILT FENCE
LOD	LIMITS OF DISTURBANCE



CLIFTON PARK
SCALE: 1" = 50'

NOTE
THE EXISTING WELL SHOWN ON THIS PLAN, TAG NO. HO 05-1361 HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.

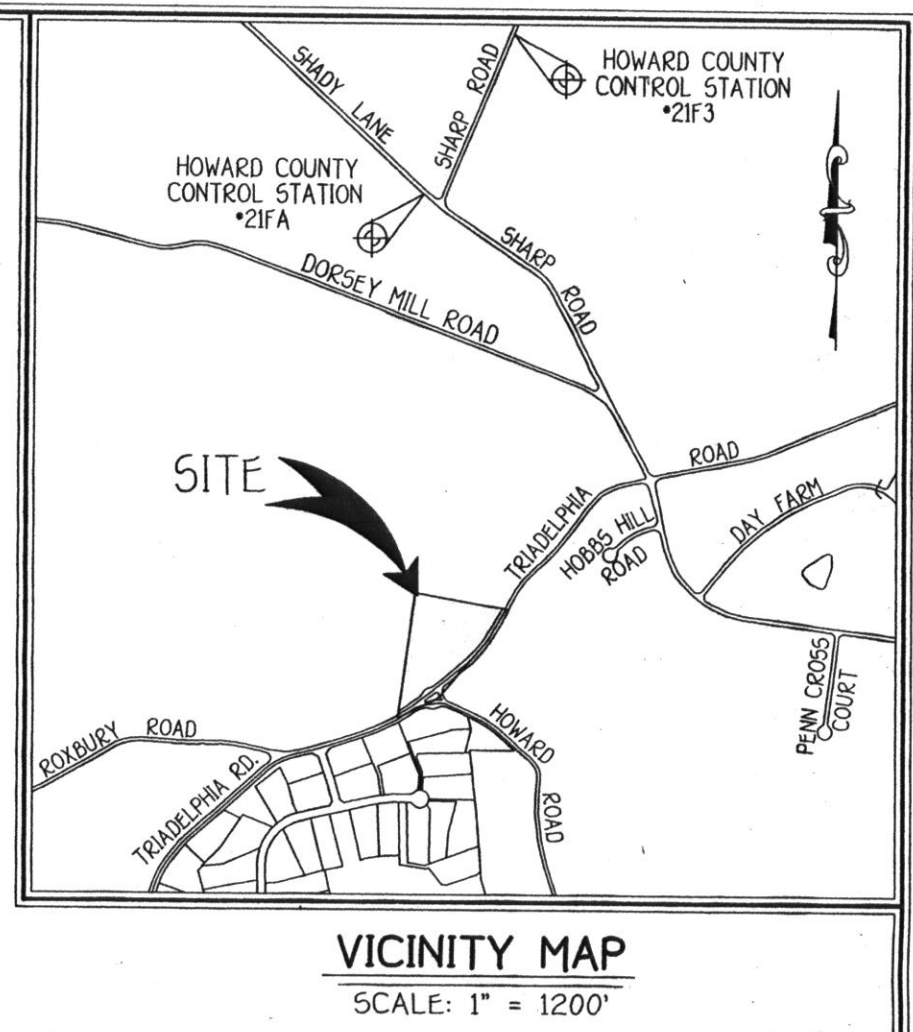
ADDRESS CHART	
LOT NUMBER	STREET ADDRESS
PARCEL 96	TRIADELPHIA ROAD

INDEX CHART	
SHEET	DESCRIPTION
SHEET 1	TITLE SHEET, HOUSE TYPE, SITE DEVELOPMENT, SEDIMENT/EROSION CONTROL
SHEET 2	SEDIMENT/EROSION CONTROL NOTES & DETAILS

THIS DEVELOPMENT IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.
APPROVED:
John R. Robertson DATE: 3/26/08
HOWARD SOIL CONSERVATION DISTRICT

2	Requested by No. Co. Health for Disg. Permit	11-10-08
2	Rev. Plan to show all lots per Plat #20246	11-10-08
2	Remove side conservatory	10-9-08
1	Rev. hse type 4 qrd.	9-11-08

OWNER/BUILDER/DEVELOPER
N.V. HOMES
6085 MARSHALLEE DRIVE
SUITE 430
ELK RIDGE, MARYLAND 20775
410-796-5956

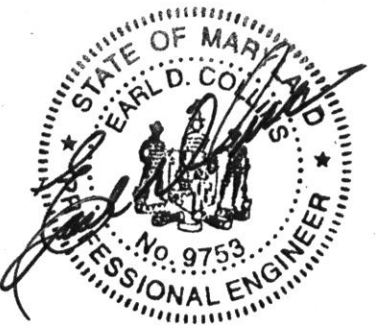


- GENERAL NOTES
- SUBJECT PROPERTY ZONED: RC-DEO
 - TOTAL AREA OF PROPERTY: 5.408 ACRES
 - SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT REVIEW.
 - LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
 - CONTRACTOR/BUILDER TO VERIFY ELEVATION IN THE FIELD BEFORE BEGINNING ANY CONSTRUCTION.
 - TOPOGRAPHY IS BASED ON AERIAL TOPOGRAPHY DONE BY HARFORD AERIAL DATED 2002.
 - NO WETLANDS CURRENTLY EXIST ON THE PROPERTY.
 - STORMWATER MANAGEMENT IS PROVIDED BY NON-ROOFTOP DISCONNECTED AND THE USE OF A LEVEL SPREADER.

DEVELOPER'S CERTIFICATE
"I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN AND THAT ANY 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."
SIGNATURE OF DEVELOPER: *Tim Naughton* DATE: 3/26/08
NVR, INC. VICE PRESIDENT

ENGINEER'S CERTIFICATE
"I HEREBY CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITION AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT."
SIGNATURE: *Earl D. Collins* DATE: 3-25-08
EARL D. COLLINS

PROFESSIONAL CERTIFICATION
"I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME AND THAT I AM A DAILY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 9753, EXPIRATION DATE: 2/28/08."
SIGNATURE: *Earl D. Collins* DATE: 3-25-08
EARL D. COLLINS



SITE DEVELOPMENT
& SEDIMENT/EROSION CONTROL PLAN
THE WARFIELDS II
LOT 4
SECTION ONE
TAX MAP NO.: 21 ZONED: RC-DEO PARCEL NO.: 96
4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1" = 50' DATE: MARCH, 2008
SHEET 1 OF 2

G.P. 08-064