

|                                                                                                                                                                                                            |  |                                                                    |                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------|----------------------------|
| DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS<br>3430 COURT HOUSE DRIVE<br>ELLCITY CITY, MD 21043<br>PERMITS (410) 313-2155 INSPECTIONS (410) 313-1810<br>AUTOMATED INFORMATION (410) 313-3800<br>130697 |  | HOWARD COUNTY<br>PERMIT APPLICATION                                | PERMIT NUMBER<br>B03000311 |
| Building Address 13079 Traylorville Mill Rd<br>Clarksville MD 21029                                                                                                                                        |  | Property Owner's Name Babatunde Adegbayo                           |                            |
| Suite/Apt. #: SDP/WP/Petition #:                                                                                                                                                                           |  | Address 5412 Clarksville Rd                                        |                            |
| Census Tract Subdivision                                                                                                                                                                                   |  | City Columbia State MD Zip Code 21045                              |                            |
| Section Area Lot 1.38 Acre                                                                                                                                                                                 |  | Home Phone 410-441-1270 Work Phone                                 |                            |
| Tax Map 34 Parcel 353 Grid 4                                                                                                                                                                               |  | Applicant's Name & Mailing Address, (if other than stated hereon): |                            |
| Zoning PR-2 Map Coordinates Lot size 1.38 Acre                                                                                                                                                             |  | Phone 410-441-1270 Fax                                             |                            |
| Existing Use Vacant                                                                                                                                                                                        |  | Contractor Company V.K. Development Corp.                          |                            |
| Proposed Use SED                                                                                                                                                                                           |  | Contact Person Cary Cumberland                                     |                            |
| Estimated Construction Cost \$ 500,000.00                                                                                                                                                                  |  | Address 815 W. Windsor Dr                                          |                            |
| Description of Work 2 story Colonial, 3 1/2 Baths<br>Unfinished Basement Wood/Brick                                                                                                                        |  | City Sykesville State MD Zip Code 21784                            |                            |
| Occupant or Tenant                                                                                                                                                                                         |  | License No. 1185                                                   |                            |
| Contact Name                                                                                                                                                                                               |  | Phone 410-977-2188 Fax 410-487-7613                                |                            |
| Address                                                                                                                                                                                                    |  | Engineer or Architect Company C&S WORKS                            |                            |
| City State Zip Code                                                                                                                                                                                        |  | Contact Person Dennis                                              |                            |
| Phone Fax                                                                                                                                                                                                  |  | Address Frederick MD                                               |                            |
|                                                                                                                                                                                                            |  | City State Zip Code                                                |                            |
|                                                                                                                                                                                                            |  | Phone 866-766-2200 Fax                                             |                            |

|                                                  |                                                                                                                                                                                   |                                                                                                    |                                                                                                                                                                                                         |
|--------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| BUILDING DESCRIPTION - COMMERCIAL                |                                                                                                                                                                                   | BUILDING DESCRIPTION - RESIDENTIAL                                                                 |                                                                                                                                                                                                         |
| <b>Building Characteristics</b>                  |                                                                                                                                                                                   | <b>Building Characteristics</b>                                                                    |                                                                                                                                                                                                         |
| Height:                                          | <b>Utilities</b>                                                                                                                                                                  | SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>              | <b>Utilities</b>                                                                                                                                                                                        |
| No. of stories:                                  | Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private                                                                                                    | Depth Width                                                                                        | Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private                                                                                                                          |
| Gross area, sq. ft. per floor:                   | Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private                                                                                                 | 1st floor: 40 55                                                                                   | Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private                                                                                                                       |
| Use group:                                       | Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>                                                    | 2nd floor: 37 55                                                                                   | Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                                    |
| Construction type:                               | Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> | Basement: 40 55                                                                                    | Heating System: <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/> |
| <input type="checkbox"/> Reinforced Concrete     | Sprinkler system: N/A <input type="checkbox"/>                                                                                                                                    | Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> | Sprinkler system: N/A <input type="checkbox"/>                                                                                                                                                          |
| <input type="checkbox"/> Structural Steel        | <input type="checkbox"/> Full <input type="checkbox"/> Partial                                                                                                                    | Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>                        | <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:                                                                                                   |
| <input type="checkbox"/> Masonry                 | <input type="checkbox"/> Other Suppression                                                                                                                                        | No. of Bedrooms 4                                                                                  |                                                                                                                                                                                                         |
| <input type="checkbox"/> Wood Frame              | # of Heads                                                                                                                                                                        | Height: 15'                                                                                        |                                                                                                                                                                                                         |
| <input type="checkbox"/> State Certified Modular |                                                                                                                                                                                   | 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:                                                                                          |                                                                                                                                                                                                         |
|                                                  |                                                                                                                                                                                   | Roof Height:                                                                                       |                                                                                                                                                                                                         |
|                                                  |                                                                                                                                                                                   | <input type="checkbox"/> State Certified Modular                                                   |                                                                                                                                                                                                         |
|                                                  |                                                                                                                                                                                   | <input type="checkbox"/> 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 Cary Cumberland  
Title/Company President

Print Name Cary Cumberland  
Date 2-8-08

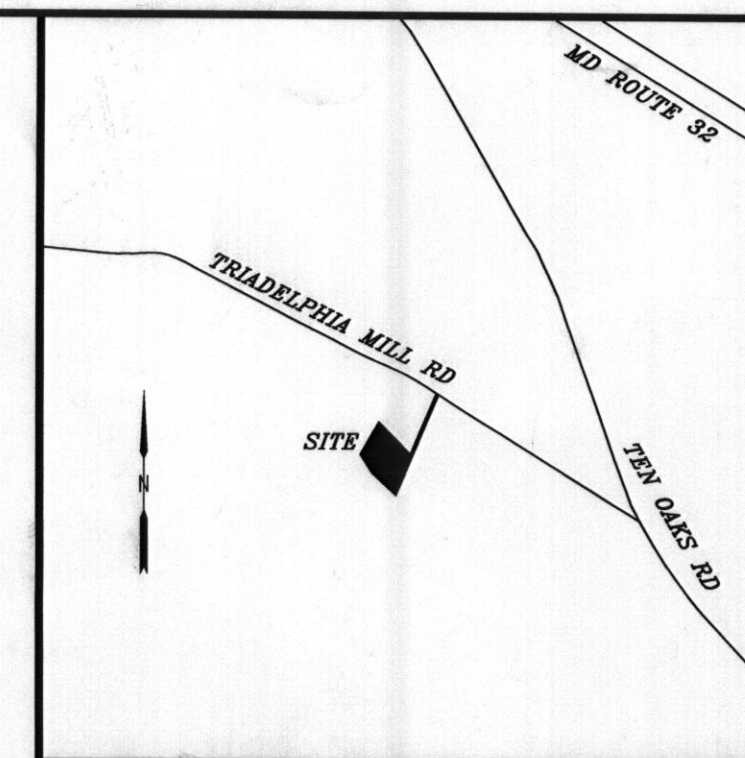
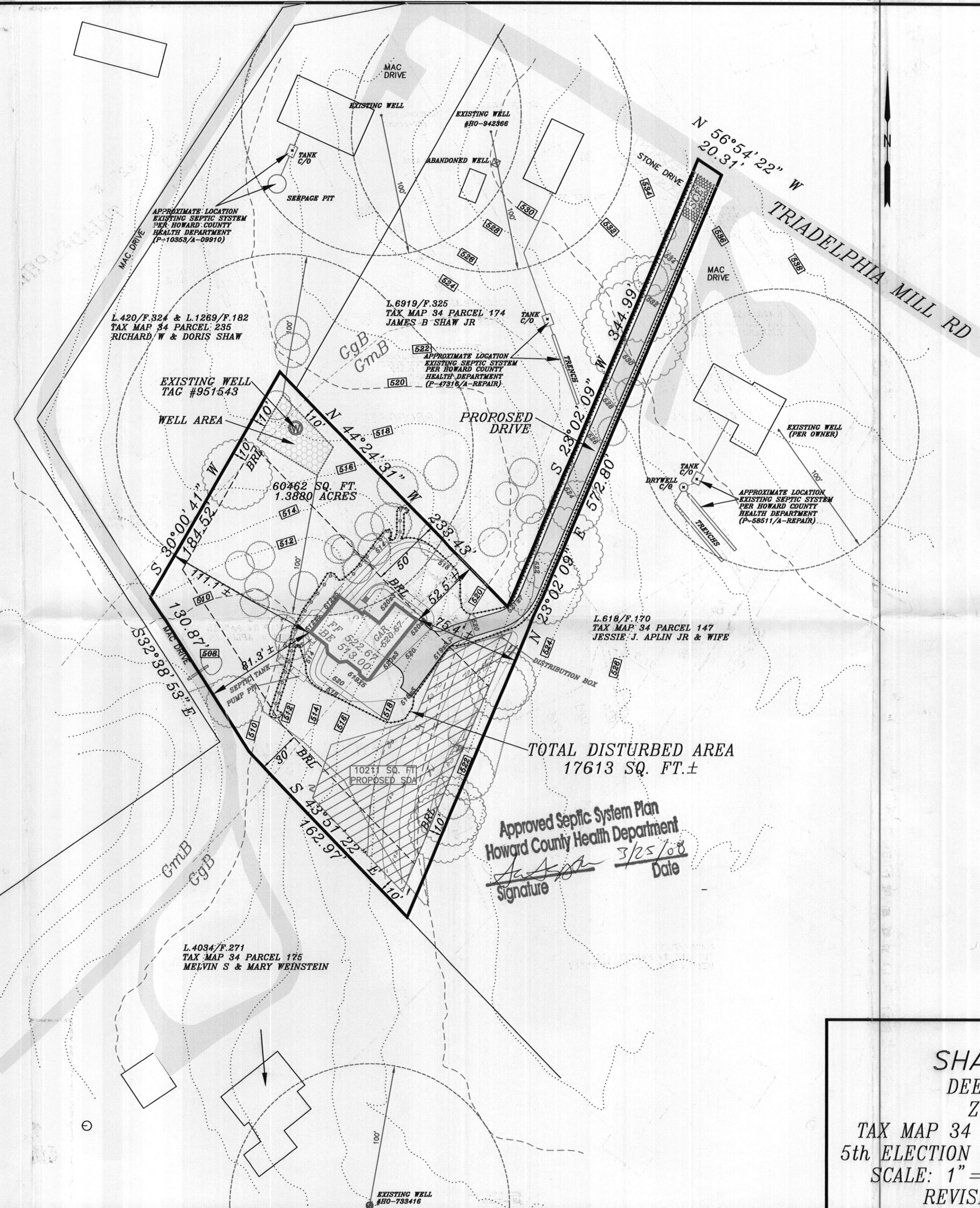
Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
- FOR OFFICE USE ONLY -

|                                                                     |                          |                    |                                                          |                      |
|---------------------------------------------------------------------|--------------------------|--------------------|----------------------------------------------------------|----------------------|
| AGENCY                                                              | DATE                     | SIGNATURE APPROVAL | DPZ SETBACK INFORMATION                                  | PROPERTY ID#         |
| <input checked="" type="checkbox"/> Land Development, DPZ           |                          |                    | Front: _____                                             | Filing fee \$ 100.00 |
| <input checked="" type="checkbox"/> State Highways                  |                          |                    | Rear: _____                                              | Permit fee \$        |
| <input checked="" type="checkbox"/> Building Official               |                          |                    | Side: _____                                              | Excise tax \$        |
| <input checked="" type="checkbox"/> Dev. Engineering, DPZ           |                          |                    | Side St: _____                                           | Add'l per. fee \$    |
| <input checked="" type="checkbox"/> Health                          | 3/25/08                  | Amelia             | All minimum setbacks met?                                | TOTAL FEES \$        |
| <input type="checkbox"/> 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 checked="" type="checkbox"/> |                          |                    | YES <input type="checkbox"/> NO <input type="checkbox"/> | Check \$ 503.1       |
| 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:                                             | White: Building Official | Green: LDD, DPZ    | Lot Coverage for NewTown Zone                            | Accepted by _____    |
| T:\Forms\PERMIT.FRM                                                 |                          |                    | SDP/Red-line approval date                               |                      |
|                                                                     |                          |                    | Yellow: DED, DPZ                                         |                      |
|                                                                     |                          |                    | Pink: Health                                             |                      |
|                                                                     |                          |                    | Gold: SHA                                                |                      |

Rev. 11/4/04

# NOTES:

1. TOPOGRAPHY SHOWN HEREON WAS FIELD-RUN BY SHANABERGER & LANE IN OCTOBER 2007
2. THIS AREA DESIGNATES A PROPOSED PRIVATE SEWAGE EASEMENT OF AT LEAST 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A REVISED SEWAGE EASEMENT SHALL NOT BE NECESSARY.
3.
  - DESIGNATES EXISTING WELL LOCATION
  - DESIGNATES PROPOSED WELL AREA
  - DESIGNATES ABANDONED WELL
  - DESIGNATES SUCCESSFUL PERC TEST
  - DESIGNATES PROPOSED HOUSE LOCATION
  - DESIGNATES SOIL TYPE BOUNDARY
  - DESIGNATES TREES OR TREELINE
  - DESIGNATES EXISTING CONTOUR
  - DESIGNATES PROPOSED CONTOUR
  - DESIGNATES SILT FENCE
  - DESIGNATES LIMIT OF DISTURBANCE
  - DESIGNATES BUILDING RESTRICTION LINE
4. SHANABERGER AND LANE MADE REASONABLE EFFORTS TO FIND AND SHOW THE LOCATION OF ALL SURROUNDING EXISTING WELLS, SEPTIC SYSTEMS AND SEWAGE DISPOSAL EASEMENTS WITHIN 100' OF THE PROPERTY BOUNDARIES.
5. SOIL TYPES: GLENELG SILT LOAM (GgB) & GLENVILLE SILT LOAM (GmB)
6. BEARINGS AND DISTANCES SHOWN HEREON ARE FROM A BOUNDARY SURVEY PERFORMED BY SHANABERGER & LANE IN JANUARY, 2008.



VICINITY MAP  
SCALE: 1"=2000'  
ADC MAP 14, GRID A7

## SEPTIC SYSTEM DATA

INV. AT HOUSE 510.5

### SEPTIC TANK

EX. GRADE 510.8  
FIN. GRADE 510.8  
INV. IN 509.4  
INV. OUT 508.1

### PUMP PIT

EX. GRADE 512.0  
FIN. GRADE 512.0  
INV. IN 509.0  
INV. OUT —

### DISTRIBUTION BOX

EX. GRADE 522.0  
FIN. GRADE 522.0  
INV. IN —  
INV. OUT —

### TRENCHES

INLET DEPTH, BOTTOM DEPTH, WIDTH, LENGTH, ORIENTATION, AND NUMBER OF TRENCHES TO BE DETERMINED BY HEALTH DEPARTMENT.

### NOTES

\* A PUMP AND PUMP PIT WILL BE REQUIRED BETWEEN SEPTIC TANK AND DISTRIBUTION BOX.

## SITE PLAN SHAW PROPERTY

DEED REF: 6919/329

ZONING: RR-DEO

TAX MAP 34 GRID 4 PARCEL 353  
5th ELECTION DIST. HOWARD COUNTY, MD.

SCALE: 1"=50' FEBRUARY 6, 2008

REVISED MARCH 17, 2008

SHANABERGER & LANE  
8726 TOWN & COUNTRY BLVD.  
SUITE 201  
ELLICOTT CITY, MD. 21043  
PHONE: 410-461-9563  
FAX: 410-461-9693