

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 B00138371
--	-------------------------------------	----------------------------

Building Address 14003 Tucke Oak Ct Suite/Apt. #: SDP/WP/Petition #: Census Tract 605101 Subdivision Section 3 Area Lot 41 Tax Map 28 Parcel 381 Grid 10 Zoning RR-100 Map Coordinates 14B1 Lot size	Property Owner's Name Address City State Zip Code Home Phone Work Phone Applicant's Name & Mailing Address, (if other than stated hereon): Phone Fax
Existing Use Proposed Use Estimated Construction Cost \$ Description of Work	Contractor Company Contact Person 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 DESCRIPTION - RESIDENTIAL	
Building Characteristics Height: No. of stories: Gross area, sq. ft. per floor: Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular	Utilities Water Supply: Public Private Sewage Disposal: Public 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"/> Full Partial Other Suppression # of Heads	Building Characteristics SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth Width 1st floor: 2nd 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: Roof: State Certified Modular Manufactured Home	Utilities Water Supply: Public Private Sewage Disposal: Public 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"/> NFPA #13D NFPA #13R Other:

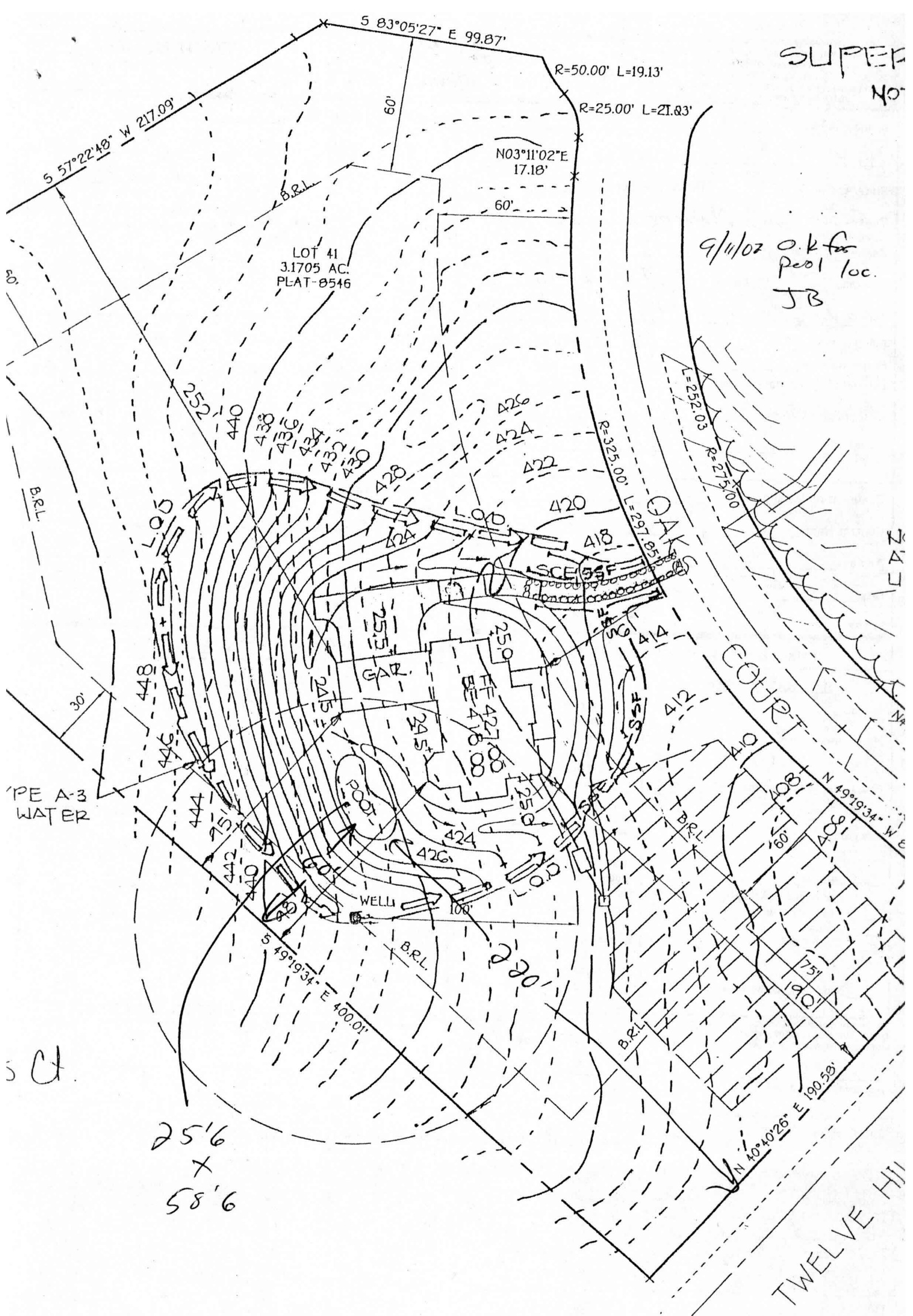
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

Applicant's Signature Title/Company	Print Name Date
--	--------------------

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY ** PLEASE WRITE NEATLY AND LEGIBLY. ** - FOR OFFICE USE ONLY -		PROPERTY ID#: 50796
AGENCY X Land Development, DPZ X State Highways X Building Official X Dev. Engineering, DPZ X Health Fire Protection	DATE 9/11/02	SIGNATURE APPROVAL [Signature]
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>	DPZ SETBACK INFORMATION Front: Rear: Side: Side St.: All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> Lot Coverage for NewTown Zone SDP/Red-line approval date	Filing fee \$ Permit fee \$ 250 Excise tax \$ Add'l per. fee \$ TOTAL FEES \$ 250 Sub-total paid \$ Balance due \$ Check # 2033 Validation # 11613
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>		Accepted by [Signature]
Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA		Rev. 5/17/00

SUPER
NO.

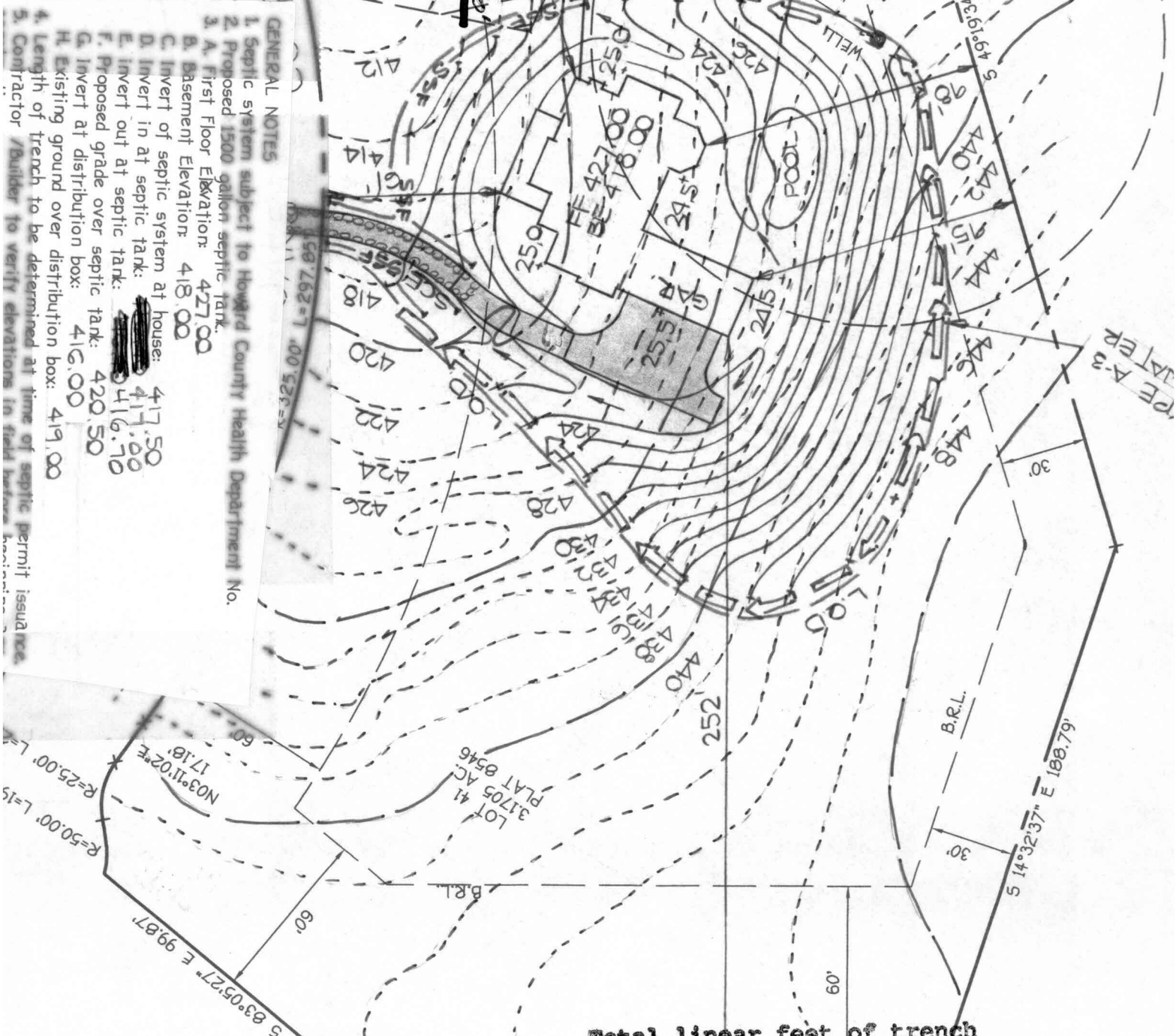
9/11/02 O.K. for
pool loc.
JB



HILLS ROAD

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CONTINENTAL SEWER OFFICE PAGE - 10272 BALTIMORE NATIONAL PLE
ELICOTT CITY, MARYLAND 21042
410 481-2895

- GENERAL NOTES**
1. Septic system subject to Howard County Health Department No.
 2. Proposed 1500 gallon septic tank.
 3. A. First Floor Elevation: 427.00
 - B. Basement Elevation: 418.00
 - C. Invert of septic system at house: 417.50
 - D. Invert in at septic tank: 417.00
 - E. Invert out at septic tank: 416.70
 - F. Proposed grade over septic tank: 420.50
 - G. Invert at distribution box: 416.00
 - H. Existing ground over distribution box: 419.00
 4. Length of trench to be determined at time of septic permit issuance.
 5. Contractor /Builder to verify elevations in field before location.



Approved Septic System Plan
Howard County Health Department

Total linear feet of trench required 280 feet

Width of trench(es) 30 feet

Depth of trench(es) 5.0 feet

Depth of stone required below distribution pipe 2.0 feet

Amey McMillen 6/1/01
Signature Date