

60009534

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3400 COURTY HOUSE DRIVE
ELICOTT CITY, MD 21043
PERMITS (410) 313-2495 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3900

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
1500157067

Building Address 4908 Valley View Aolack
Ellicott City MD 21042
Suite/Apt # 05-441749 SDPWP/Petition #:
Census Tract 6051.01 Subdivision Hammock Crossing
Section _____ Area _____ Lot 42
Tax Map 29 Parcel 28 Grid 9
Zoning RC Map Coordinates 14 R 3 Lot size 49,699 P

Property Owner's Name Toll MD 3 LP
Address 7164 Columbia Gateway Dr #230
City Columbia State MD Zip Code 21046
Home Phone _____ Work Phone 410-489-0292
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use: Vacant Lot
Proposed Use: Residential Home
Estimated Construction Cost \$ 350,000
Description of Work Anty Colonial with
Wardes Sun Room

Contractor Company Toll MD 3 LP
Contact Person Nathan Beidle
Address 7164 Columbia Gateway Dr #230
City Columbia State MD Zip Code 21046
License No. _____
Phone 410-489-6292 Fax 410-489-0292

Occupant or Tenant Toll MD 3 LP
Contact Name Nathan Beidle
Address 7164 Columbia Gateway Dr #230
City Columbia State MD Zip Code 21046
Phone 410-489-6292 Fax 410-489-6293

Engineer or Architect Company Architect
Contact Person Van Thompson
Address 21400 Bell Ave Noll Pk #18
City Ellicott City State MD Zip Code 21043
Phone 410-489-5000 Fax 410-489-6614

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height:	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories:	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> 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: <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	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	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ Height _____	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: <u>81'</u> <u>68'</u> <u>9'</u> 2nd floor: <u>81'</u> <u>68'</u> <u>30'</u> Basement: <u>81'</u> <u>68'</u> <u>10'</u>	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
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 _____ Height: <u>42'</u> Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" 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.

Applicant's Signature Nathan Beidle
Title/Company _____

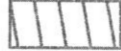
Print Name Nathan Beidle
Date 9/9/06

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>9/9/06</u>	<u>[Signature]</u>
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <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? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone	Check # <u>08581675</u>
SDP/Red-line approval date _____	Validation # <u>111548</u>
	Accepted by <u>[Signature]</u>

NOTES:

1. THE LOT SHOWN HEREON WAS RECORDED ON 12-13-05 AS PLAT NUMBER 17896. REFER TO THIS PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND BUILDING RESTRICTIONS.
2.  THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. 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 SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
3. EXACT LENGTH OF SEPTIC TRENCHES ARE TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF PRECONSTRUCTION INSPECTION.
4. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
5. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER F-05-031 AND SHALL COMPLY WITH THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
6. STORMWATER MANAGEMENT FOR THIS LOT WAS PROVIDED UNDER F-05-031.
7. THE EXISTING WELL (TAG NO. HO-95-0277) SHOWN ON THIS PLAN HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC. ON APRIL 11, 2006 AND IS ACCURATELY SHOWN.

F= 17896

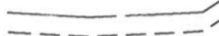



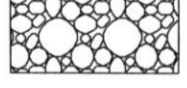





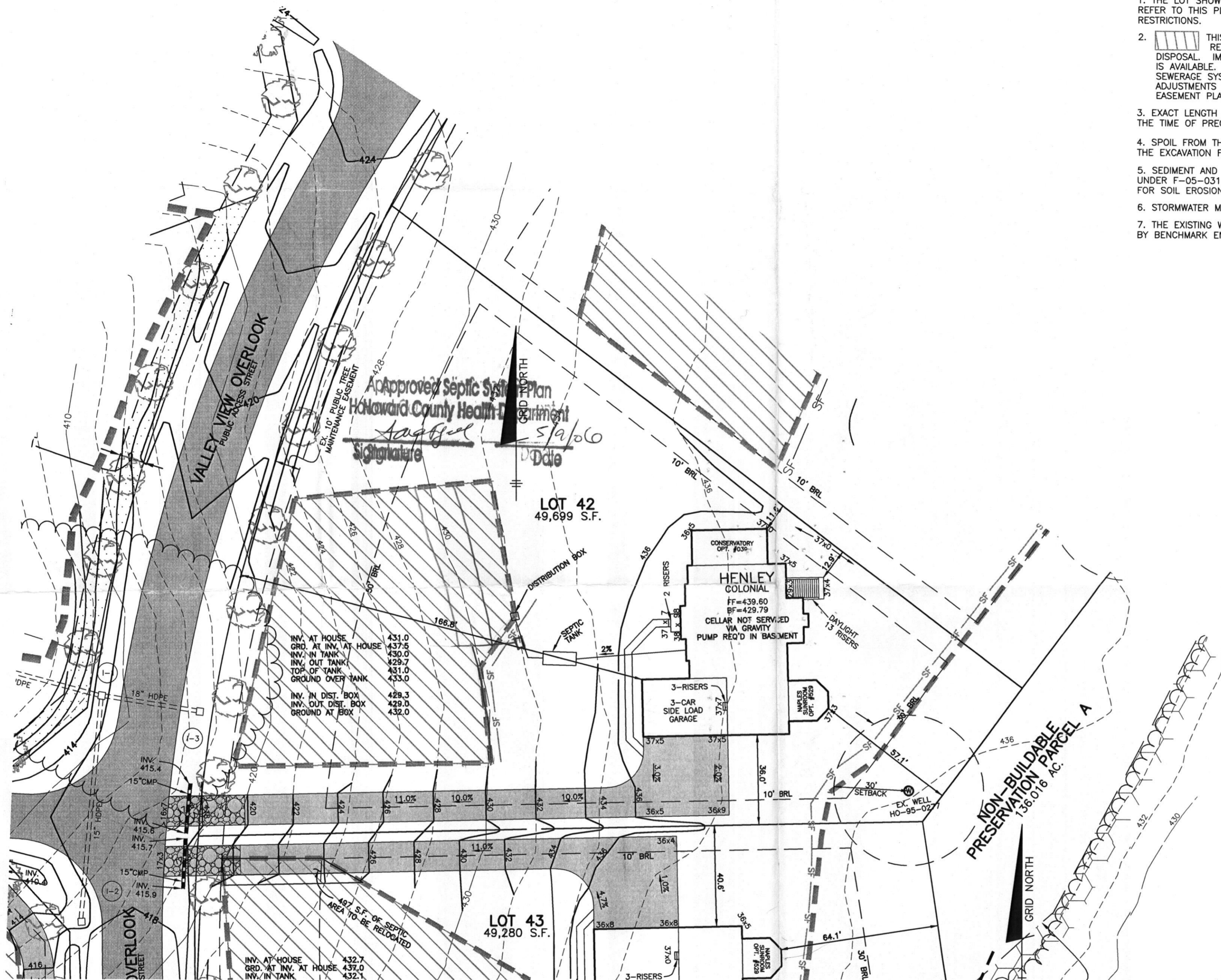
FULL DEPTH BIT. CONC. ALTERNATIVE

P-1 PAVING DETAIL

NOT TO SCALE

LEGEND

-  EXISTING CONTOURS ESTABLISHED UNDER F-05-031
-  FIELD SURVEYED WELL LOCATION
-  STREET TREES INSTALLED UNDER F-05-031
-  INDICATES WALK-OUT BASEMENT LOCATION
-  STABILIZED CONSTRUCTION ENTRANCE PROPOSED UNDER THIS PLOT PLAN
-  SUPER SILT FENCE INSTALLED UNDER F-05-031
-  SILT FENCE INSTALLED UNDER F-05-031
-  LIMIT OF DISTURBANCE



Approved Septic System Plan
 Howard County Health Department
 Signature: [Signature]
 Date: 5/9/06

INV. AT HOUSE	431.0
GRD. AT INV. AT HOUSE	437.5
INV. IN TANK	430.0
INV. OUT TANK	429.7
TOP OF TANK	431.0
GROUND OVER TANK	433.0
INV. IN DIST. BOX	428.3
INV. OUT. DIST. BOX	429.9
GROUND AT BOX	432.0
INV. AT HOUSE	432.7
GRD. AT INV. AT HOUSE	437.0
INV. IN TANK	432.1

<p align="center">BENCHMARK ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS ENGINEERING, INC.</p> <p align="center">8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418 ELLICOTT CITY, MARYLAND 21043 PHONE: 410-465-6105 FAX: 410-465-6644 www.bei-civilengineering.com</p>	<p>HOMEWOOD CROSSING PLOT PLAN LOT 42</p>	
	<p>4908 VALLEY VIEW OVERLOOK TAX MAP 29, GRID 9 - PARCEL 28 3rd ELECTION DISTRICT HOWARD COUNTY, MARYLAND</p>	
<p>BUILDER: TOLL MD III LIMITED PARTNERSHIP 7164 COLUMBIA GATEWAY DRIVE SUITE 230 COLUMBIA, MARYLAND 21046 410-872-9105</p>	<p>HOUSE TYPE: HENLEY COLONIAL ELEVATION</p>	
<p>DATE: APRIL 11, 2006</p>	<p>PROJECT NO. 1913</p>	
<p>SCALE: 1" = 30'</p>	<p>DRAWING 1 OF 1</p>	