

|                                                                                                                                                                                                 |  |                                                                                                                                                              |  |                                                   |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|--|
| DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS<br>3430 COURT HOUSE DRIVE<br>ELLICOTT CITY, MD 21043<br>PERMITS (410)313-2455 INSPECTIONS (410)313-1810<br>AUTOMATED INFORMATION (410) 313-3800 |  | <b>HOWARD COUNTY</b><br><b>PERMIT APPLICATION</b>                                                                                                            |  | <b>PERMIT NUMBER</b><br>S. B00134577              |  |
| Building Address <u>11119 Green Willow Way</u><br><u>Woodstock MD 21163</u>                                                                                                                     |  | Property Owner's Name <u>M. &amp; Mrs. Raina</u>                                                                                                             |  | Address <u>Same</u>                               |  |
| Suite/Apt. #: <u>      </u> SDP/WP/Petition #: <u>      </u>                                                                                                                                    |  | City <u>      </u> State <u>      </u> Zip Code <u>      </u>                                                                                                |  | Home Phone <u>      </u> Work Phone <u>      </u> |  |
| Census Tract <u>6030.00</u> Subdivision <u>Woodlands Grant</u>                                                                                                                                  |  | Applicant's Name & Mailing Address, (if other than stated hereon):<br><u>Hugh's Services Inc.</u><br><u>1911 Corewood Lane</u><br><u>Woodstock, MD 21163</u> |  |                                                   |  |
| Section <u>—</u> Area <u>—</u> Lot <u>18</u>                                                                                                                                                    |  | Tax Map <u>10</u> Parcel <u>326</u> Grid <u>22</u>                                                                                                           |  | Phone <u>410 750 3421</u> Fax <u>410 750 2062</u> |  |
| Zoning <u>RC</u> Map Coordinates <u>613A</u> Lot size <u>      </u>                                                                                                                             |  | Contractor Company <u>      </u>                                                                                                                             |  |                                                   |  |
| Existing Use <u>residence - SFD</u>                                                                                                                                                             |  | Contact Person <u>      </u>                                                                                                                                 |  |                                                   |  |
| Proposed Use <u>Same</u>                                                                                                                                                                        |  | Address <u>      </u>                                                                                                                                        |  |                                                   |  |
| Estimated Construction Cost <u>\$120,000 + 9,100 =</u>                                                                                                                                          |  | City <u>      </u> State <u>      </u> Zip Code <u>      </u>                                                                                                |  |                                                   |  |
| Description of Work <u>finish basement 10' x 10'</u><br><u>Rec. Office 10' x 13'</u>                                                                                                            |  | License No. <u>76000</u>                                                                                                                                     |  |                                                   |  |
| Occupant or Tenant <u>      </u>                                                                                                                                                                |  | Engineer or Architect Company <u>      </u>                                                                                                                  |  |                                                   |  |
| Contact Name <u>      </u>                                                                                                                                                                      |  | Contact Person <u>      </u>                                                                                                                                 |  |                                                   |  |
| Address <u>      </u>                                                                                                                                                                           |  | Address <u>      </u>                                                                                                                                        |  |                                                   |  |
| City <u>      </u> State <u>      </u> Zip Code <u>      </u>                                                                                                                                   |  | City <u>      </u> State <u>      </u> Zip Code <u>      </u>                                                                                                |  |                                                   |  |
| Phone <u>      </u> Fax <u>      </u>                                                                                                                                                           |  | Phone <u>      </u> Fax <u>      </u>                                                                                                                        |  |                                                   |  |

| BUILDING DESCRIPTION - COMMERCIAL                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | BUILDING DESCRIPTION - RESIDENTIAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Building Characteristics</b><br>Height: <u>      </u><br>No. of stories: <u>      </u><br>Gross area, sq. ft. per floor: <u>      </u><br>Use group: <u>      </u><br>Construction type:<br><input type="checkbox"/> Reinforced Concrete<br><input type="checkbox"/> Structural Steel<br><input type="checkbox"/> Masonry<br><input type="checkbox"/> Wood Frame<br><input type="checkbox"/> State Certified Modular | <b>Utilities</b><br>Water Supply:<br><input type="checkbox"/> Public<br><input type="checkbox"/> Private<br>Sewage Disposal:<br><input type="checkbox"/> Public<br><input type="checkbox"/> Private<br>Electric Yes <input type="checkbox"/> No <input type="checkbox"/><br>Gas Yes <input type="checkbox"/> No <input type="checkbox"/><br>Heating System:<br>Electric <input type="checkbox"/> Oil <input type="checkbox"/><br>Natural Gas <input type="checkbox"/><br>Propane Gas <input type="checkbox"/><br>Sprinkler system: N/A <input type="checkbox"/><br><input type="checkbox"/> Full<br><input type="checkbox"/> Partial<br><input type="checkbox"/> Other Suppression<br><input type="checkbox"/> # of Heads | <b>Building Characteristics</b><br>SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/><br><u>Depth</u> <u>Width</u><br>1st floor: <u>      </u><br>2nd floor: <u>      </u><br>Basement: <u>      </u><br>Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/><br>Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/><br>No. of Bedrooms <u>      </u><br>Multi-family dwellings:<br>No. of efficiency units: <u>      </u><br>No. of 1 BR units: <u>      </u><br>No. of 2 BR units: <u>      </u><br>No. of 3 BR units: <u>      </u><br>Other Structure: <u>      </u><br>Dimensions: <u>      </u><br>Footings: <u>      </u><br>Roof: <u>      </u><br><input type="checkbox"/> State Certified Modular<br><input type="checkbox"/> Manufactured Home | <b>Utilities</b><br>Water Supply:<br><input type="checkbox"/> Public<br><input checked="" type="checkbox"/> Private<br>Sewage Disposal:<br><input type="checkbox"/> Public<br><input checked="" type="checkbox"/> Private<br>Electric Yes <input type="checkbox"/> No <input type="checkbox"/><br>Gas Yes <input type="checkbox"/> No <input type="checkbox"/><br>Heating System:<br>Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/><br>Natural Gas <input type="checkbox"/><br>Propane Gas <input type="checkbox"/><br>Sprinkler system: N/A <input type="checkbox"/><br><input type="checkbox"/> NFPA #13D<br><input type="checkbox"/> NFPA #13R<br><input type="checkbox"/> Other: |

THE UNDERSIGNED HEREBY CERTIFIES AND ADORES 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 THERE TO; (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.

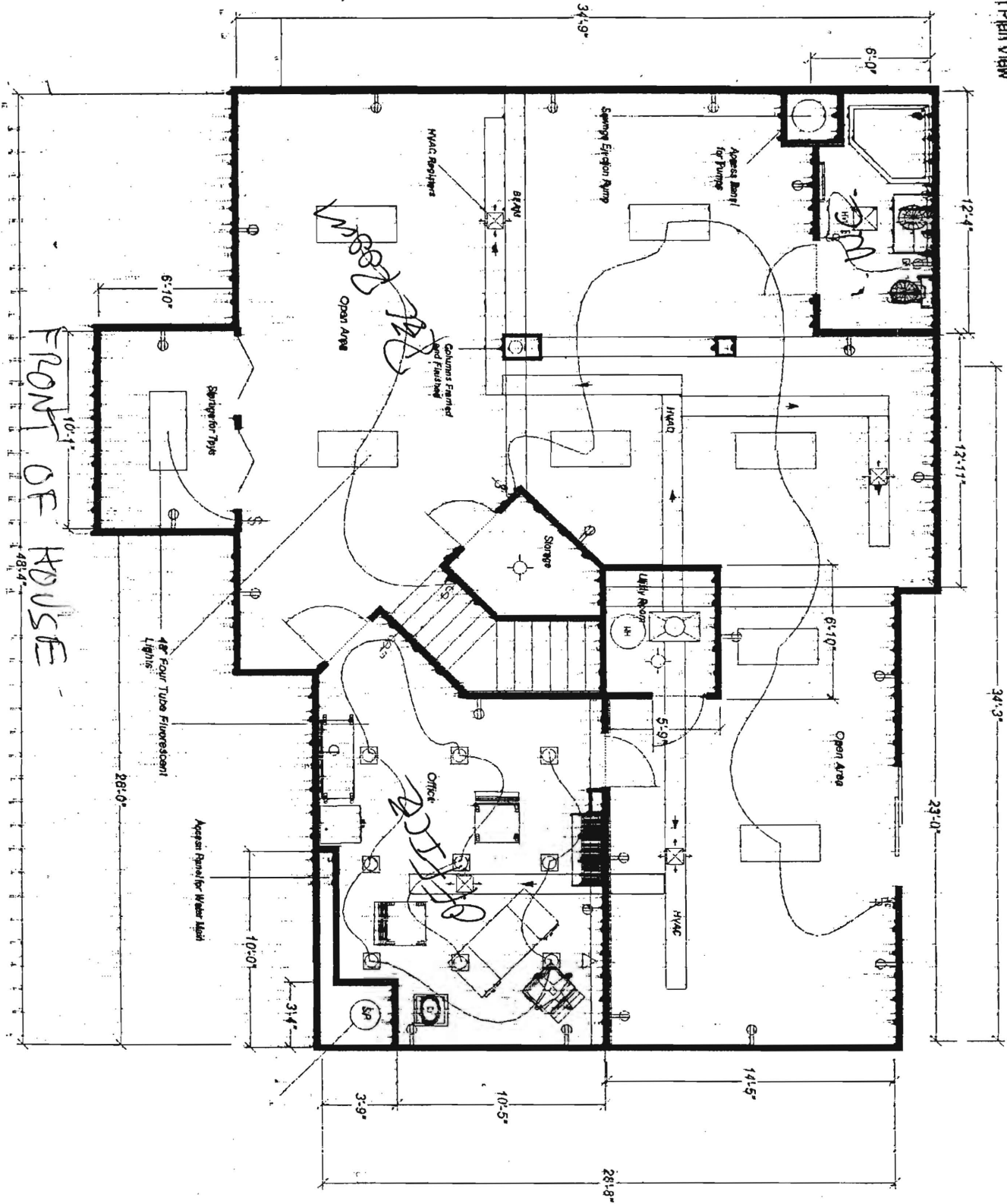
Applicant's Signature Hugh Mallick Print Name Hugh Mallick  
Feb. 27 2002 Date  
 Title/Company       

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: <u>      </u>                                     | Filing fee \$ <u>75</u>         |
| State Highways                                           |                          |                    | Rear: <u>      </u>                                      | Permit fee \$ <u>65</u>         |
| Building Official                                        | <u>2/27/02</u>           | <u>[Signature]</u> | Side: <u>      </u>                                      | Excise tax \$ <u>      </u>     |
| Dev Engineering DPZ                                      |                          |                    | Side St.: <u>      </u>                                  | Add'l per. fee \$ <u>      </u> |
| Health                                                   | <u>2/27/02</u>           | <u>[Signature]</u> | All minimum setbacks met?                                | TOTAL FEES \$ <u>73</u>         |
| Fire Protection                                          |                          |                    | YES <input type="checkbox"/> NO <input type="checkbox"/> | Sub-total paid \$ <u>      </u> |
| Is Sediment Control approval required prior to issuance? |                          |                    | Is Entrance Permit required?                             | Balance due \$ <u>      </u>    |
| YES <input type="checkbox"/> NO <input type="checkbox"/> |                          |                    | YES <input type="checkbox"/> NO <input type="checkbox"/> | Check # <u>3169</u>             |
| CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> |                          |                    | Historic District?                                       | Validation # <u>      </u>      |
| ONE STOP SHOP: <input type="checkbox"/>                  |                          |                    | YES <input type="checkbox"/> NO <input type="checkbox"/> |                                 |
|                                                          |                          |                    | Lot Coverage for New Town Zone                           |                                 |
|                                                          |                          |                    | SDP/Red-line approval date                               | Accepted by <u>      </u>       |
| Distribution of Copies:                                  | White: Building Official | Green: LDD, DPZ    | Yellow: DED, DPZ                                         | Pink: Health                    |
|                                                          |                          |                    |                                                          | Gold: SHA                       |

127/02 (10)  
CONTRACTOR REPORTS NO WINDOWS  
NO BR USE

**RAJNA RESIDENCE**  
**Basement Plan View**



DEPARTMENT 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

PERMIT NUMBER  
B00126828

Building Address 1119 WILLOW GREEN WAY  
MARRIOTTSVILLE 21104  
Suite/Apt. #: SDP/WP/Petition #:  
Census Tract 6030 Subdivision WOODFORD'S GRANT  
Section 3 Area Lot 18  
Tax Map 10 Parcel 293 Grid 22  
Zoning RCDLO Map Coordinates 5K13 Lot size  
Existing Use Vacant Lot  
Proposed Use S.F.D  
Estimated Construction Cost \$ 110,000  
Description of Work CUSTOM HOME - 2 STORY,  
FULL BSMT, 9R, 4FB, FP, LARABL  
(4BR)  
Occupant or Tenant N/A  
Contact Name  
Address  
City State Zip Code  
Phone Fax

Property Owner's Name Trinity Builders  
Address 7320 Grace Dr.  
City Columbia State MD Zip Code 21044  
Home Phone Work Phone 410-313-8722  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Phone Fax 410-313-8731  
Contractor Company Same  
Contact Person  
Address  
City State Zip Code  
License No. Phone Fax  
Engineer or Architect Company Same  
Contact Person  
Address  
City State Zip Code  
Phone Fax

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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Sally L. Hodge  
Applicant's Signature  
VP Operations - Trinity  
Title/Company

Sally Hodge  
Print Name  
10/6/00  
Date

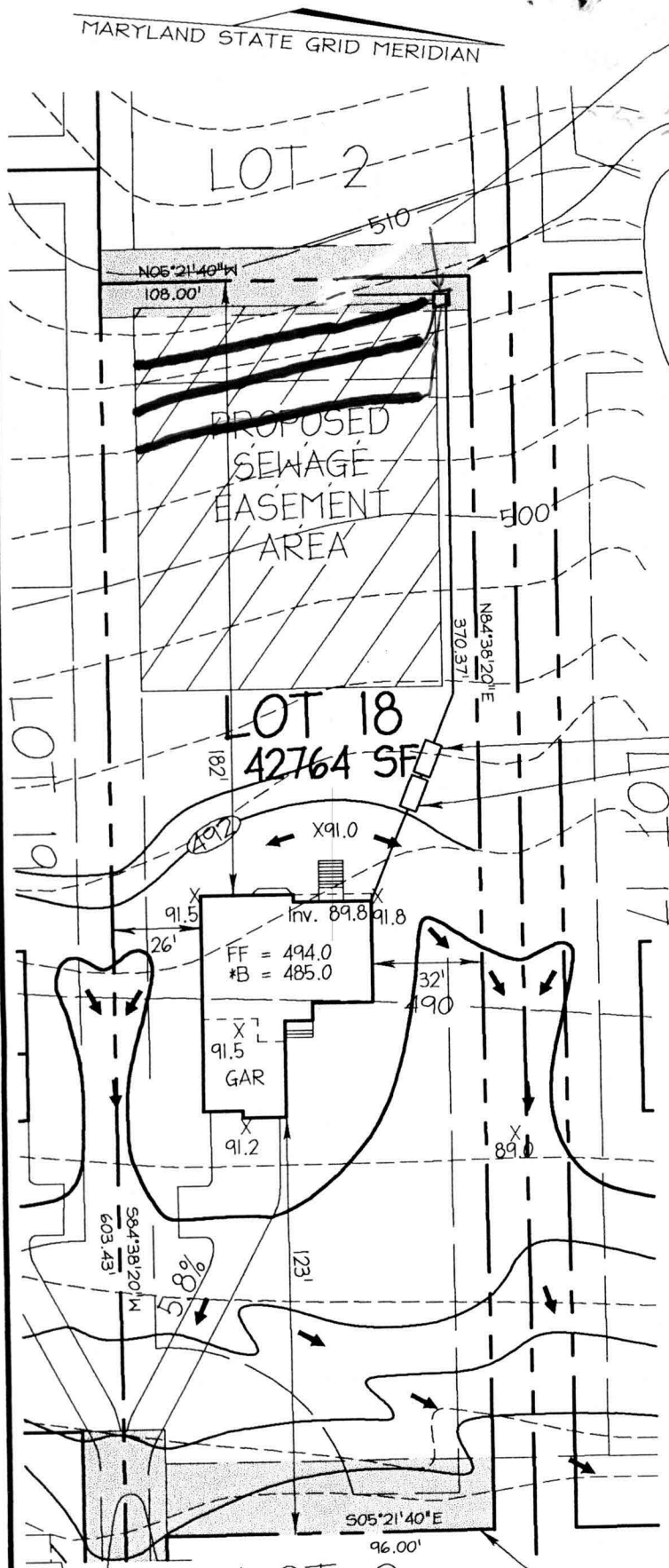
Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
- FOR OFFICE USE ONLY -

AGENCY DATE SIGNATURE APPROVAL  
X Land Development, DPZ  
X State Highways  
X Building Official  
X Dev. Engineering, DPZ  
Health 10/18/00 J. McMillen  
Fire Protection  
X Is Sediment Control approval required prior to issuance?  
YES NO  
CONTINGENCY CONSTRUCTION START: ☐  
ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION  
Front:   
Rear:   
Side:   
Side St.:   
All minimum setbacks met?  
YES NO  
Is Entrance Permit required?  
YES NO  
Historic District?  
YES NO  
Lot Coverage for New Town Zone  
SDP/Red-line approval date: Accepted by

PROPERTY ID#: 46207  
Filing fee \$ 29.00  
Permit fee \$  
Excise tax \$  
Sub-total paid \$  
Add'l permit fee \$  
TOTAL FEES \$  
Balance due \$  
Check # 1095  
Validation # 29543

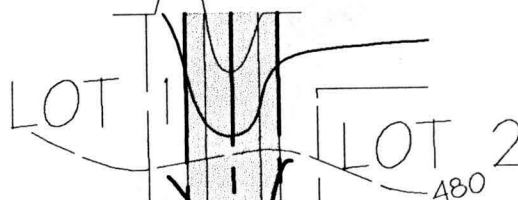
MARYLAND STATE GRID MERIDIAN



Distribution Box  
Ex. ground: 508.0  
Inv: 505.0

20' Private Septic Access Easement

24' Private Use-In-Common Easement  
for Lots 1, 2, 18 & 19.



Pump Tank  
Ground: 493.2  
Inv: 488.7

1250 Gal. Septic Tank  
Ground: 492.1  
Inv. In: 489.2  
Inv. Out: 488.9



WILLOW  
GREEN WAY

\*Tanks should be set so that  
cover is maximum of 3.0' \*

\*Basement does not sewer by gravity

Total linear feet of trench  
required 240 feet

Width of trench(es) 3.0 feet  
20' Public Drainage & Utility Easement

Depth of trench(es) 5.0 feet

Depth of stone required below  
distribution pipe 2.0 feet

**VOGEL &  
ASSOCIATES**  
ENGINEERS • SURVEYORS • PLANNERS

3691 Park Avenue, Suite 101 • Ellicott City, Maryland 21043  
Tel 410.461.5828 Fax 410.465.3966

Approved Septic System Plan  
Howard County Health Department

PREPARED FOR

TRINITY HOMES, Inc.

7320 Bruce Drive

Columbia, Maryland 21044

Signature

Date

SCALE 1"=50'  
DRAWN BY MM  
CHECKED BY JCO  
DATE October 2, 2000  
W. O. # 98-097

PLOT PLAN  
LOT 18  
WOODFORDS GRANT III

TAX MAP 10 BLOCK 22 REFERENCE PLAT'S 13800-13802  
PARCEL 293 3rd ELECTION DISTRICT HOWARD COUNTY, MARYLAND