

Building Permit Application

Howard County Maryland

Department of Inspections, Licenses and Permits

3430 Court House Drive

Permits: 410-313-2455 www.howardcountymd.gov

Date	Received:	
Date	Received:	

Permit No.: B13000984

Building Address: 14651 To	21ADElphia Rd	Property Owner's Name: NVR 10	ic
City: Greenela State:	- 1	Address: 6085 Marshat	
•	· · · · · · · · · · · · · · · · · · ·	City: EKridge State: M	
Suite/Apt. #SDP Census Tract:	WATFIELDS TE	Email:	ax:
Census Tract:	Subdivision:		
Section: Area Tax Map: 27 Parcel:	a:Lot:	Applicant's Name & Mailing Address () Applicant's Name & ROOM	other than stated herein)
Tax Map: Parcel:_	114 Grid:	Address	. 0
Zoning: Map Coordina	tes:Lot Size:Lo 945	City State: N	Zip Code
		1   Priorie: - ( () 12 2   ( ) 12	
Existing Use:		Email:	
Proposed Use:	JOOK .	Contractor Company: Q Q Q Q	ational bas
Estimated Construction Cost: \$ 0.4		Contact Person William G	
Estimated Construction Cost: 5	1000 600	Address: 200 Monte Me	010
Description of Work:	TOO ELO	City State: Other	Zip Code: 20794
and barais rapan	6015 40UF	License No. : 07793	
		Phone: Fax: _	
Occupant or Tenant:		Email:	
Occupant or Tenant:	Was Date	The state of the s	mlc
Was tenant space previously occupied?	Yes □No	Engineer/Architect Company	
Contact Name:		Responsible Design Prof.:	
Address:		Address:	
City:	State: Zip Code:	City:State:	_ Zip Code:
Phone:		Phone: Fax:	
Email:		Email:	
Commercial Building Characteristics	Residential Building Characteristics	Utilities	
Height:	SF Owelling SF Townhouse	Water Supply	<b>W</b>
No. of stories:	Depth Width	☐ Public	
Gross area, sq. ft./floor:	1st floor:	K Private	
	2 <sup>nd</sup> floor:	Sewage Disposal	
Area of construction (sq. ft.):	Basement:	□ Public	
Has aroun	☐ Finished Basement	S Private	
Use group:	☐ Unfinished Basement ☐ Crawl Space		
Construction type:	☐ Slab on Grade	Electric:	
☐ Reinforced Concrete	No. of Bedrooms:	Gas: Yes 🗆 No	
☐ Structural Steel	Multi-family Dwelling	<u>Heating System</u>	
Masonry	No. of efficiency units:	☐ Electric ☐ Oil	
☐ Wood Frame	No. of 1 BR units:	☐ Natural Gas ☐ Propane Gas	医乳性二体 计管理
☐ State Certified Modular	No. of 2 BR units:	☐ Other:	
	No. of 3 BR units:	Sprinkler System:	
	Other Structure:	☐ Yes ☐ No	Walter Land Company
	Dimensions:		A CONTRACTOR OF THE PARTY OF TH
> Roadside Tree Project Permit	Footings:	Grading Permit Number:	
□Yes Dono	Roof:	J. J	
Roadside Tree Project Pormit #	☐ State Certified Modular ☐ Manufactured Home	Building Shell Permit Number:	
	□ Wandractured Florine	building Steat Critic Mariaer.	
	ES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO PRICH ARE ASPLICABLE THERETO; (4) THAT HE/SHE I INTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PRO	MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS C WILL REFFORM NO WORK ON THE ABOVE REFERENCED PRI PERTATOR THE PURPOSE OF INSPECTING THE WORK PERMI	/ &
Applicant o Signature	ada ada coccorred	rint Name	RECEIVED
	DOMON MODELLINES	· 11/ 3K 111 1	
Email Address	601020006 Com	are	
Email Address ()	edondopproved.	one A	MAR 2 0 2013

Permits: 410-313-2455 Inspections: 410-313-1810 Automated Line: 410-313-3800 Howard County Building/Fire Permit Application Department of Inspections, Licenses & Permits

3430 Court House Drive Ellicott City, MD 21043

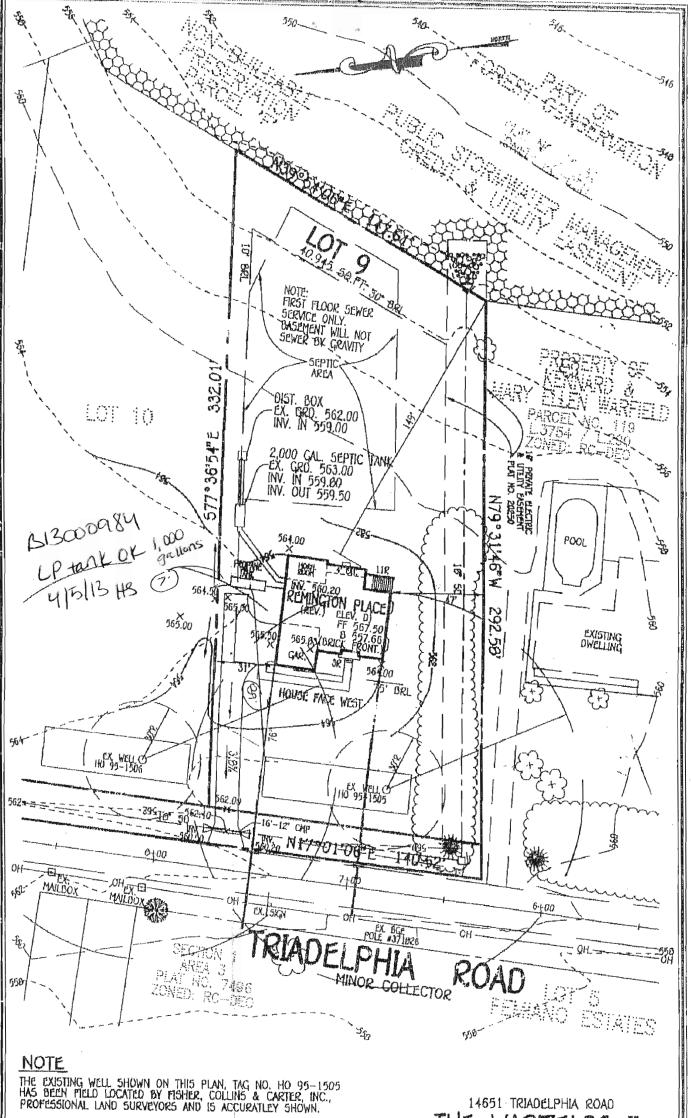
Building Address: 146	•				VR INC.
Glonely 1		•			-uxent woods Drive
Suite/Apt. #	SDP	/WP/BA#: GP 09	7-63	1	te: MD Zip Code: 21046
Census Tract:					Work Phone:
Section:					dress, (If other than stated herein):
Тах Мар:			• 1	JIM KERWIN	WOOBINE MD 21797
Zoning: Ma				Phone: 443-309-779	
			·	Email Time O Decatus	Building Services . con
Existing Use:					
Proposed Use: Single	e trav	rily house		Contractor Company: NV	
Estimated Construction Cos	t: \$ <b>2</b> \$	50,050		Contact Person: Ryan	went woods or
Description of Work:	w 2	Story " Remnyt	m Place"	City: Columbia State:	mb Zip Code: 2-10 46m
with 2 can go	adiga.	Marin Rom	4'587	License No. : 54	
& Family com	and	finished love	land		6 Fax: 410-379- 2430
Occupant or Tenant:	,			Email:	
Was tenant space previous	v occupied?	☐Yes	□No	Engineer/Architect Company:	
Contact Name:				Responsible Design Prof.:	
				Address:	
Address:	,				
City:				ł	Zip Code:
Phone:		Fax:		Phone:	Fax:
Email:				Email:	
BUILDI	NG DESCRIPT	TON - COMMERCIAL		BUILDING DES	CRIPTION - RESIDENTIAL
Building Characteris	stics	Utilities		Building Characteristics	Utilities
Height:		Water Supply	<u>.</u>	Ø SF Dweiling ☐ SF Townhous  Depth Widt	
No. of stories:		☐ Public		1st floor: 66 × 85	
Gross area, sq. ft./floor:		☐ Private		2 <sup>nd</sup> floor: 32 > 59	Sewage Disposal
Area of construction (sq. fr	. 1.	Sewaae Dispos  ☐ Public	<u>gi</u>	Basement: 56	□ Public □ Private
Area or construction (sq. 1)		Private		☐ Unfinished Basement	Electric: Yes No
Use group:		Electric: D Yes	□No	☐ Crawl Space	Gas: ☑Yes ☐ No
		Gas: 🔲 Yes	□ No	☐ Slab on Grade	Heating System
Construction type	e:	Heating System	2	No. of Bedrooms: 4  Multi-family Dwelling	☐ Oil
☐ Reinforced Concrete		☐ Electric ☐ Oil		No. of efficiency units:	☐ Natural Gas
☐ Structural Steel		☐ Natural Gas ☐ Prop	ane Gas	No. of 1 BR units:	Propane Gas
☐ Masonry ☐ Wood Frame		Sprinkler Syste	<u>m:</u>	No. of 2 BR units:	
☐ State Certified Modular		□ N/A	·	Other Structure:	
Roadsice Tree Project				Dimensions:	77.72.20.20.32.7.10.00.00.00.00.00.00.00.00.00.00.00.00.
	Trees.	☐ Other Suppression		Footings: Roof:	Readside Tree Project Fermit
Bondelate Trea Project 8	nois les	No. of Heads:		State Certified Modular	- Roadide tree Problet Respille
19	EDITORICA ESCENTION PARA			☐ Manufactured Home	
					MATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY RENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN
THIS APPLICATION; (5) THAT HE/SHE				RTY FOR THE PURPOSE OF INSPECTING THE V	
Applicant's Signature			. Drie	JIM KERWIN	
		1			2012
Email Address	r ISULL	aing services .c	Date Total	te /	
Email Address  AGENT NV	Home	دح			
Title/Company				WANGE OF LIGHT AND	
AND AND DESCRIPTION OF THE PROPERTY OF THE PARTY OF THE P	57.32A		EASE WRITE NEAT	NANCE OF HOWARD COUNTY TLY & LEGIBLY **	
			HOR OFFICE		and the state of t
AGENCY	DATE SIG	GNATURE OF APPROVAL	DPZ SETBACK II	NFORMATION	Filting Fee \$ 50.00
State Highways			Front:		Permit Fee \$
Building Officials			Rear:		Tech Fee \$
PSZA (Zoning)			Side:		Excise Tax \$
PSZA (Engineering)			Side St.:		PSFS \$ Guaranty Fund \$
Health	2/18/12	Suellat	All minimum se	etbacks met?	Add'i per Fee \$
Fire Protection		1/2		mit Required?	Total Fees \$
Is Sediment Control approva  CONTINGENCY CONSTRU			Historic District		Sub- Total Paid \$
☐ ONE STOP SHOP	CHON START	/~		or New Town Zone:	Balance Due \$

Distribution of Copies: White: Building Officials Green: PS T:\Operations\Updated Forms\New building app 11.10.2010.docx Green: PSZA,Zoning

Yellow: PSZA, Engineering

Lot Coverage for New Town Zone: SDP/Red-line approval date:

> Pink: Health Gold: SHA



FISHER, COLLINS & CARTER, INC.

CENTENNIAL SQUARE OFFICE PARK — 10272 BALTIHORE HATIONAL PIKE ELLICOTT CITY, MARTANO 21042 (410) 461 — 2055

## THE WARFIELDS

LOT 9 SECTION TWO ZONED: RC-DEO

TAX MAP NO.: 21 GRID NO.: 23 PARCEL NO.: 55
4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1" = 50" DATE: NOVEMBER, 2012

HEALTH TO THE REAL PROPERTY OF THE PARTY OF THE PAR B12003999 Approved Septic System Plan BRL NOTE: FIRST FLOOR SEWER SERVICE ONLY. BASEMENT WILL NOT SEWER BY GRAVITY Howard County Nealth Departmen 12/17/12 ignature LARR SFD SEPTIC AREA 915T. BOX EX. GRO. 562.00 INV. IN 559.00 2,000 CAL SEPTIC EX. GRD. 563.00 INV. IN 559.80 INV. DUT 559.50 N79°31 ITANS POOL 564.00 N.940.A 292.58 565.00 EXISTING DWELLING 565.83 CARX HD 95-150 HO 95 TO -16'-12" CM 5020 N 17 MALBOX EX. SIGN POLE #371820 QH. MINOR COLLECTOR 558 Ö FEMANO NOTE THE EXISTING WELL SHOWN ON THIS PLAN, TAG NO. HO 95-1505 HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATLEY SHOWN. 14651 TRIADELPHIA ROAD THE WARFIELDS FISHER, COLLINS & CARTER, INC. LOT 9 SECTION TWO CENTENNAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE ELLICOTT CITY, MARYLAND 21042 (410) 461 - 2855 ZONED: RC-DEO TAX MAP NO.: 21 GRID NO.: 23 PARCEL NO.: 55
4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1" = 50" DATE: NOVEMBER, 2012

1 1/20/17

Permits: 410-313-2455 Inspections: 410-313-1810 Automated Line: 410-313-3800

Census Tract: \_\_\_\_\_

Existing Use: Vacant Lot

Was tenant space previously occupied?

Section: \_\_\_\_

Occupant or Tenant:

Contact Name: \_\_\_\_

City: \_

Phone:

Building Address: 14651 TRIadel Phia RD

Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_ Lot Size: \_\_\_\_

Description of Work: New 2 Story "Remnyton Place"
with 2 car garage, Marin Room, 4' 681
to Family room, and finished Rower level

State: Zip Code:

Proposed Use: Single Family house

Estimated Construction Cost: \$ 250,000

SDP/WP/BA#: **GP 09-63** 

\_\_\_\_\_Area: \_\_\_\_\_Lot:\_\_\_**9** 

Subdivision: Warfields II

Wenely mo 21737

Howard County Building/Fire Pe Department of Inspections, Lice

> 3430 Court House D Ellicott City, MD 210

Permit Application Permit Number: 3999 Censes & Permits B/203999 Drive 1043 G-0900234
Property Owner's Name: NVR Inc.
Address: 9720 Paturent woods Drive
City: Columbia State: MD Zip Code: 21046
Home Phone: Work Phone:
Applicant's Name & Mailing Address, (If other than stated herein):  TIM KERWIN  PO BOX 552 WIDDBINE MD 21797
Phone: 443-309-7792 Fax: Email: Jim e Decatur Building Services. Com
Contractor Company: NV Homes
Contact Person: Ryan Johnson Address: 9720 Paturent woods Dr.
City: Columbia State: MD Zip Code: 21046
License No.: 54
Phone: 410-379.5956 Fax: 410-379-2430
Email:
Engineer/Architect Company:
Responsible Design Prof.:
Address:
City: State: Zip Code:
Phone: Fax:
Email:

**BUILDING DESCRIPTION - COMMERCIAL Building Characteristics** Utilities Height: Water Supply No. of stories: ☐ Public Gross area, sq. ft./floor: ☐ Private Sewage Disposal ☐ Public Area of construction (sq. ft.): ☐ Private ☐ No Use group: Electric: ☐ Yes ☐ Yes □ No Gas: Construction type: **Heating System** ☐ Reinforced Concrete ☐ Electric Oil ☐ Structural Steel ☐ Natural Gas ☐ Propane Gas ☐ Masonry Sprinkler System: ☐ Wood Frame □ N/A ☐ State Certified Modular ☐ Full Roadside Tree Project Permit ☐ Partial □Yes □No ☐ Other Suppression No. of Heads: Roadside Tree Project Permit#

Email:	
BUILDING DESCRIP	TION – RESIDENTIAL
Building Characteristics	Utilities
SF Dwelling SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	☐ Public
1 <sup>st</sup> floor: 66 × 54	☐ Private
2 <sup>nd</sup> floor: 32 } 54	<u>Sewage Disposal</u>
Basement: 56 x 54	☐ Public
Finished Basement	Private
☐ Unfinished Basement	Electric: Yes No
☐ Crawl Space	Gas: ☐ Yes ☐ No
☐ Slab on Grade	<u>Heating System</u>
No. of Bedrooms: 4	☑ Electric
Multi-family Dwelling	□ Oil
No. of efficiency units:	☐ Natural Gas
No. of 1 BR units:	Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	> Roadside Tree Project Permit
Roof:	□Yes ☑No
☐ State Certified Modular	Roadside Tree Project Permit #
☐ 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.

Specificant's Signature

Print Name

Jim @ Decatur Building Services . Com

AGENT NV Homes

Title/Company

2012

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

\*\*PLEASE WRITE NEATLY & LEGIBLY\*\* -FOR OFFICE USE ONLY-

**AGENCY** DATE SIGNATURE OF APPROVAL State Highways **Building Officials** PSZA (Zoning) PSZA (Engineering) Health Is Sediment Control approval required for issuance? ☐ CONTINGENCY CONSTRUCTION START

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 Z	one:	
SDP/Red-line approval date:		

Filing Fee	5 50
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

Distribution of Copies:

ONE STOP SHOP

White: Building Officials T:\Operations\Updated Forms\New building app 11.10.2010.docx

Green: PSZA,Zoning

Yellow: PSZA, Engineering

Pink: Health

Gold: SHA

