

B11001922

Building Address: 10910 Tompkins Way
Woodstock, MD 21163
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Forest & Waverly
Section: _____ Area: _____ Lot: 8 616A
Tax Map: 0010 Parcel: 0330 Grid: 0023
Zoning: _____ Map Coordinates: _____ Lot Size: 1.1 AC

Existing Use: Res
Proposed Use: Res
Estimated Construction Cost: \$ 20K
Description of Work: Sundeck

Occupant or Tenant: Anthony Esposito
Was tenant space previously occupied? ☒ Yes ☐ No
Contact Name: Anthony Esposito
Address: 10910 Tompkins Way
City: Woodstock State: MD Zip Code: 21163
Phone: 301 526 4390 Fax: _____
Email: _____

Property Owner's Name: Anthony Esposito
Address: 10910 Tompkins Way
City: Woodstock State: MD Zip Code: 21163
Home Phone: 301 526 4390 Work Phone: _____
Applicant's Name & Mailing Address, (if other than stated herein): _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: Letler Const. Inc.
Contact Person: Greg Letler
Address: 4320 Oakwood Drive
City: New Windsor State: MD Zip Code: 21276
License No.: 67453
Phone: 240 676 8375 Fax: _____
Email: greg@letlerconstruction.com

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

BUILDING DESCRIPTION - COMMERCIAL

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

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor: <u>50</u> <u>50</u>	<input checked="" type="checkbox"/> Private
2 nd floor: <u>50</u> <u>50</u>	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input checked="" type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms: <u>4</u>	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input checked="" type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<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: Greg Letler Print Name: Gregory Letler
Email Address: greg@letlerconstruction.com Date: 6/29/11
Title/Company: OWNER

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	<u>7/2/11</u>	<u>William Scott</u>
Fire Protection		

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: _____

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

G00009599

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

B-9-000-284

Building Address 10910 Tompkins Way
Woodstock 21163

Property Owner's Name Trinity Quality Homes Inc

Address 3675 Park Ave #301

Suite/Apt. #: _____ SDP/WP/Petition #: GP-06-28

Census Tract 6030 Subdivision Preserve at Glen Waverly

City Ellicott City State MD Zip Code 21043

Section _____ Area _____ Lot 8

Home Phone _____ Work Phone 410-313-8722
Applicant's Name & Mailing Address, (if other than stated hereon):

Tax: Map 31 Parcel 226 Grid 23

Phone _____ Fax 410-313-8731

Zoning RCO Map Coordinates 6B13 Lot size 1.11 AC

Contractor Company TRINITY QUALITY HOMES INC

Contact Person SALLY HODGE

Existing Use Vacant Lot

Proposed Use SFD

Estimated Construction Cost \$ 256,000

Address 3675 PARK AVE #301

City ELLCOTT CITY State MD Zip Code 21043

License No. 699

Phone 410-313-8722 Fax 410-313-8731

Description of Work YORKSHIRE MANOR
2 STORY, FULL BSMT, 10R, 2 TB
1 NB, FP & GARAGE (5BR)

Occupant or Tenant N/A

Engineer or Architect Company N/A

Contact Name _____

Contact Person _____

Address _____

Address _____

City _____ State _____ Zip Code _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIALBUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Utilities

Height: _____

No. of stories: _____

Gross area, sq. ft. per floor: _____

Use group: _____

Construction type:

☐ Reinforced Concrete
☐ Structural Steel
☐ Masonry
☐ Wood Frame

☐ State Certified Modular

Water Supply:

☐ Public
☐ Private

Sewage Disposal:

☐ Public
☐ Private

Electric Yes ☐ No ☐

Gas Yes ☐ No ☐

Heating System:

Electric ☐ Oil ☐

Natural Gas ☐

Propane Gas ☐

Sprinkler system: ☐ N/A ☐

☐ Full

☐ Partial

☐ Other Suppression

☐ # of Heads

Building Characteristics

Utilities

SF Dwelling ☒ SF Townhouse ☐
Depth Width

1st floor: _____

2nd floor: _____

Basement: _____

Finished Basement ☒ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐

No. of Bedrooms: _____

Height: _____

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: _____

☐ State Certified Modular

☐ Manufactured Home

Water Supply:

☒ Public
☒ Private

Sewage Disposal:

☐ Public
☒ Private

Electric Yes ☒ No ☐

Gas Yes ☒ No ☐

Heating System:

Electric ☒ Oil ☐

Natural Gas ☒

Propane Gas ☐

Sprinkler system: ☐ N/A ☒

☐ NFPA #13D

☐ NFPA #13R

☐ Other:

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Sally L Hodge

Applicant's Signature

VP Operations - Trinity

Title/Company

Sally Hodge

Print Name

2/24/09

Date

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

☒ State Highways

☒ Building Official

☒ Dev. Engineering, DPZ

☒ Health

☒ Fire Protection

Is Sediment Control approval required prior to issuance?

YES ☒ NO ☐

CONTINGENCY CONSTRUCTION START: ☐

ONE STOP SHOP: ☐

Front: _____

Rear: _____

Side: _____

Side St.: _____

All minimum setbacks met?

YES ☐ NO ☐

Is Entrance Permit required?

YES ☐ NO ☐

Historic District?

YES ☐ NO ☐

Lot Coverage for NewTown Zone

SDP/Red-line approval date

Filing fee \$ 100.00

Permit fee \$ _____

Excise tax \$ _____

Add'l per. fee \$ _____

TOTAL FEES \$ _____

Sub-total paid \$ _____

Balance due \$ _____

Check # 16297

Validation # _____

Accepted by SHA

Distribution of Copies-

White: Building Official

Green: LDD, DPZ

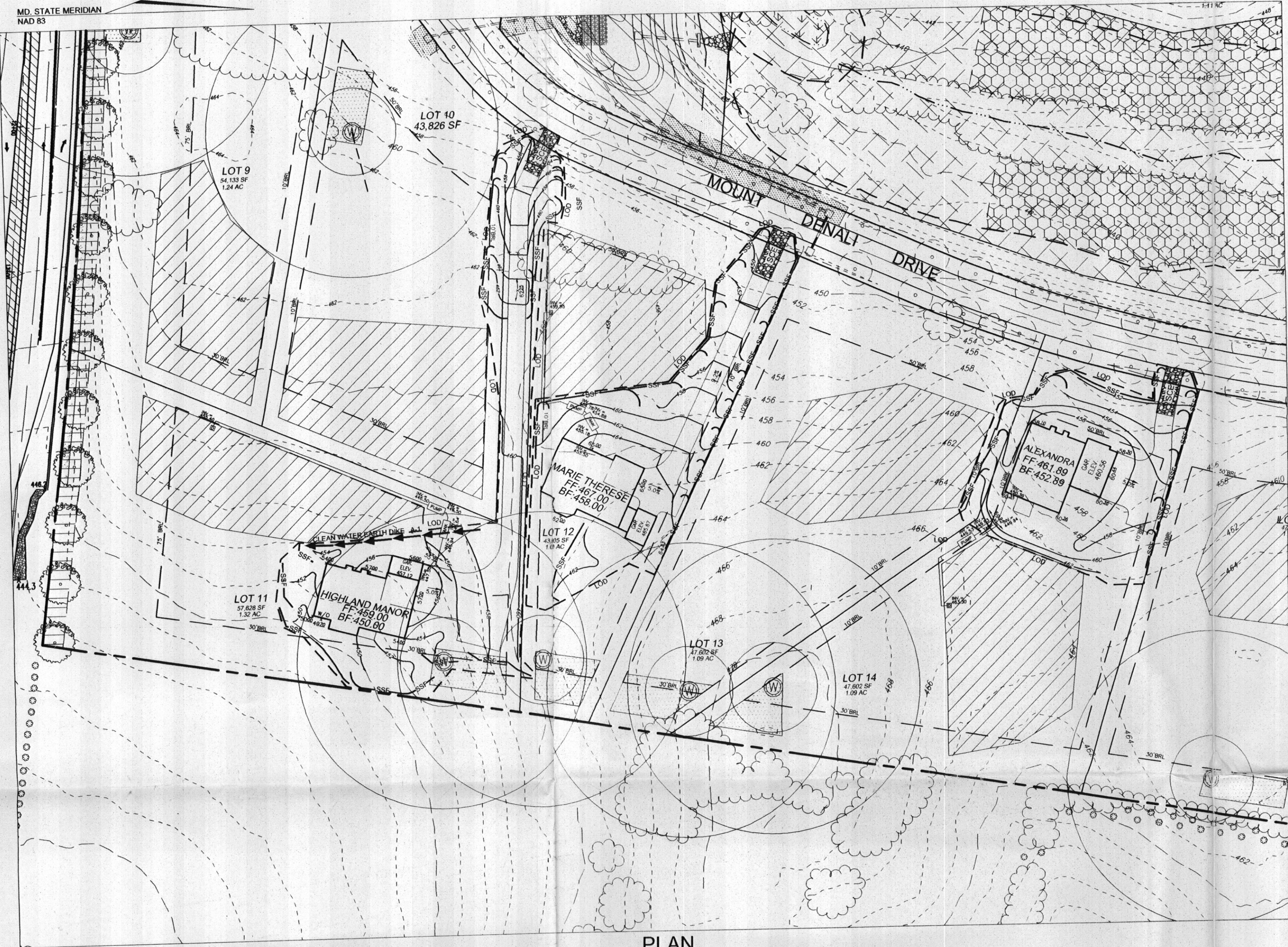
Yellow: DED, DPZ

Pink: Health

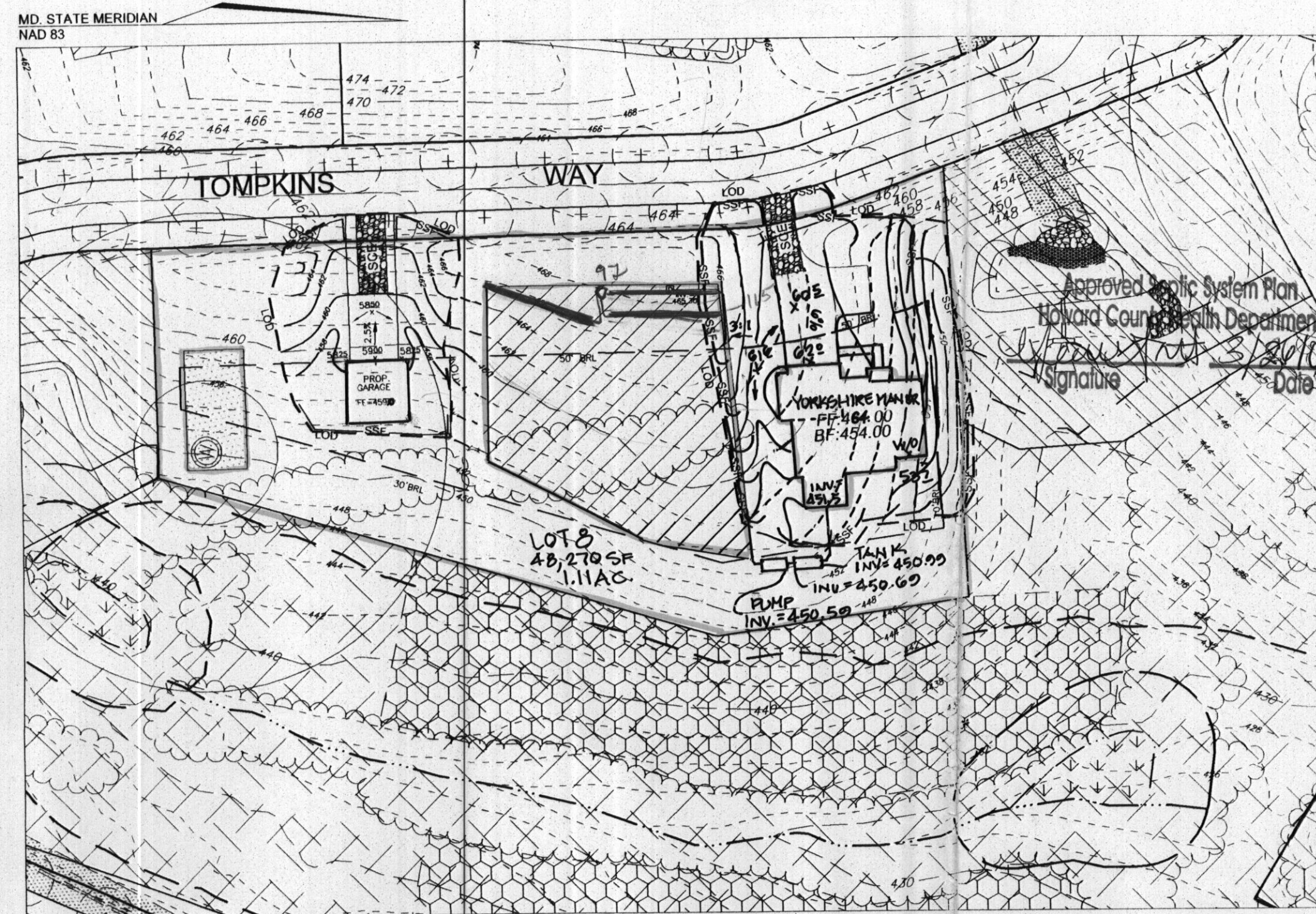
Gold: SHA

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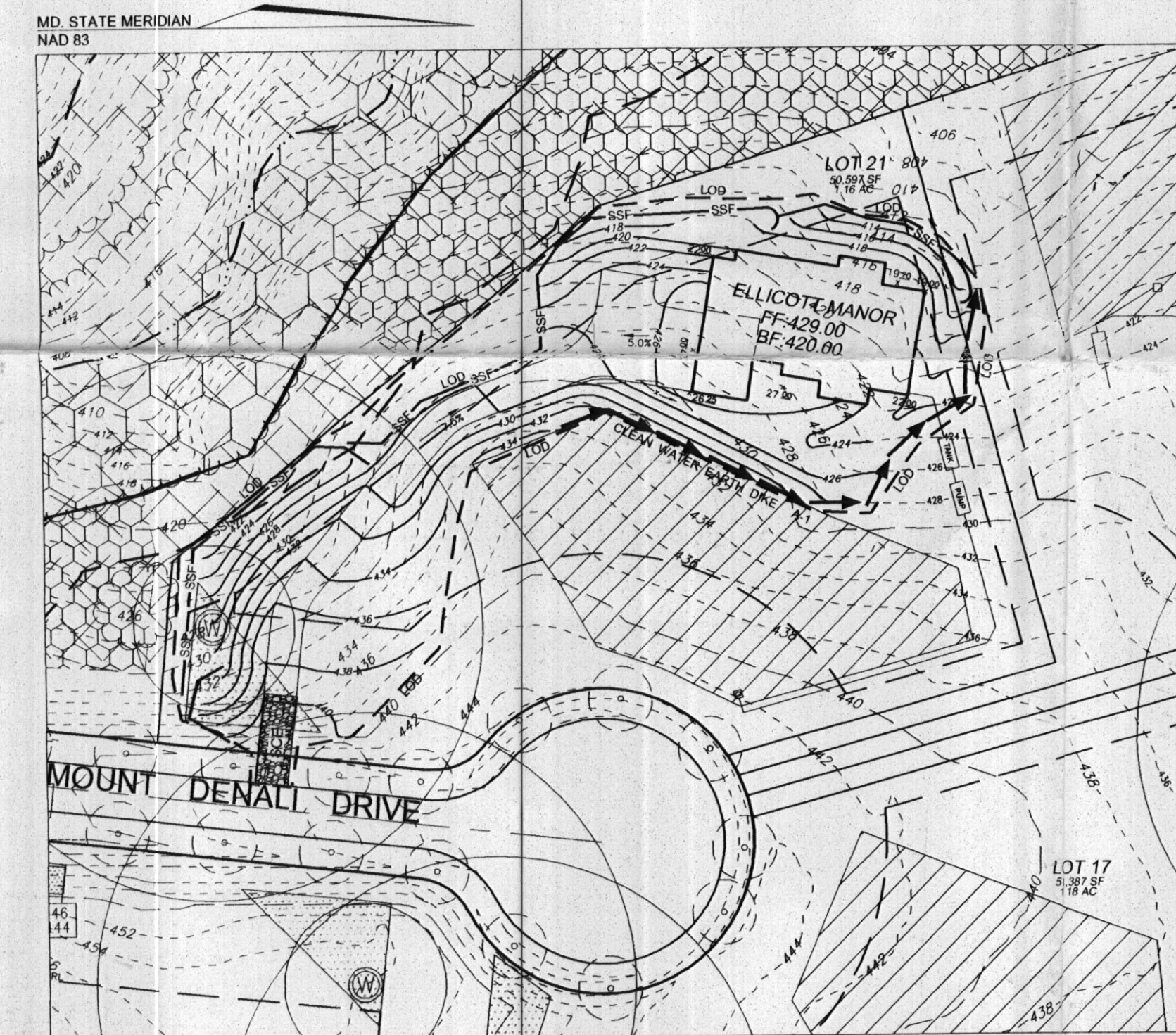
Rev. 11/4/04



PLAN
SCALE: 1"=50'

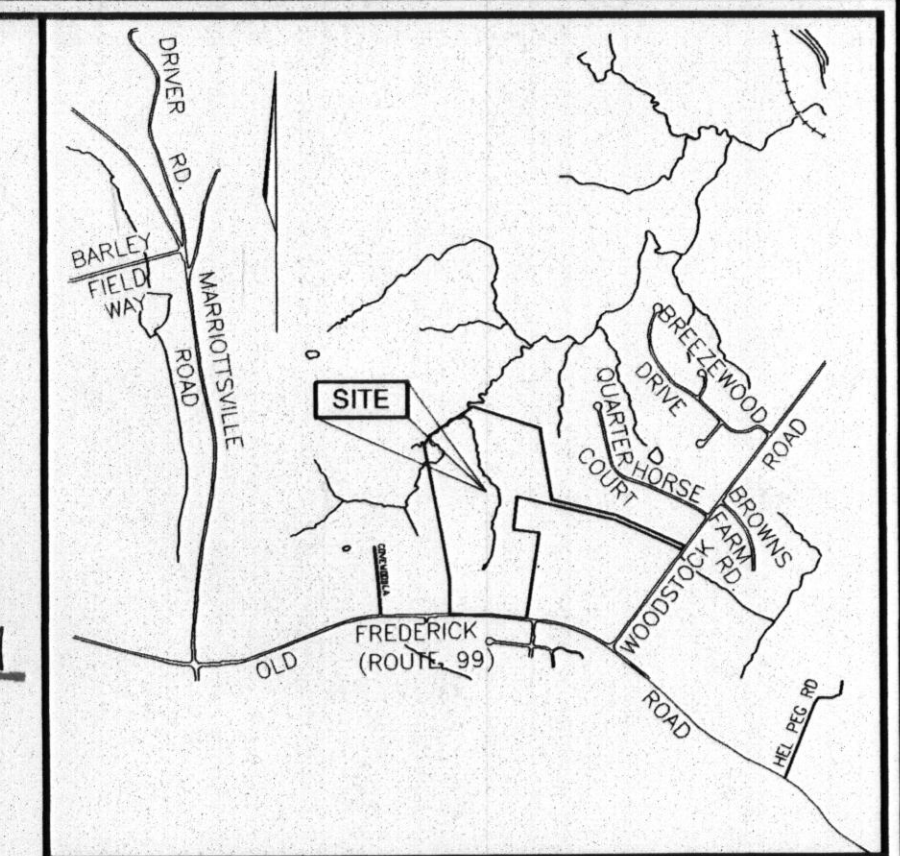


PLAN
SCALE: 1"=50'



PLAN
SCALE: 1"=50'

NOTE: SWM FOR THESE LOTS (WQV, REV + CPV) IS PROVIDED BY 3 EXISTING FACILITIES AND CREDITS APPROVED UNDER F-03-103. NO ADDITIONAL SWM REQUIRED.



VICINITY MAP
SCALE: 1"=2000'

LEGEND	
---	EXISTING 2 FT CONTOUR
---	EXISTING 10 FT CONTOUR
---	LOD
---	LIMIT OF DISTURBANCE
---	SUPER SILT FENCE
---	EXISTING TREELINE

NOTE: NO STOCKPILING WILL BE PERMITTED ON SITE.

THE EXISTING WELL SHOWN ON LOT 8 TAG NO. HD-94-3875 HAS BEEN FIELD LOCATED BY ROBERT H. VOGEL ENGINEERING, INC.

BUILDING OF LOT 8 FLOOR AREAS:
 BASEMENT FLOOR AREA: _____
 FIRST FLOOR AREA: 2625
 SECOND FLOOR AREA: 2625

FOR GRADING PERMIT REFERENCE GP-_____

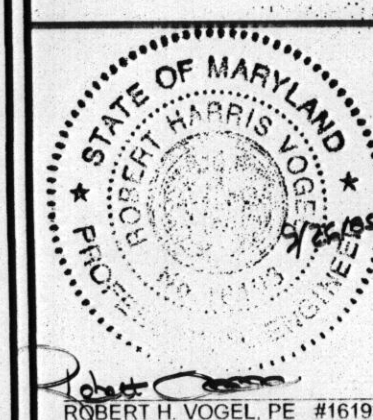
NO.	REVISION	DATE
1	REVISE SEPTIC BASIN LOT 8	3/20/09

GRADING AND SEDIMENT EROSION CONTROL PLAN THE PRESERVE AT WAVERLY GLEN BUILDING PERMIT # 0900018A LOTS 8, 11, 12, 14, and 21

REF: S-02-03, P-03-02, F-99-25, F-86-13, F-03-193

TAX MAP: 10 BLOCK: 23 PARCELS: 304 & 102
 1ST ELECTION DISTRICT HOWARD COUNTY, MARYLAND

ROBERT H. VOGEL ENGINEERING, INC.
 ENGINEERS • SURVEYORS • PLANNERS
 8407 MAIN STREET TEL: 410.461.7666
 ELLICOTT CITY, MD 21043 FAX: 410.461.8961



DESIGN BY: _____ RN
 DRAWN BY: _____ RN
 CHECKED BY: _____ RHV
 DATE: SEPTEMBER 2005
 SCALE: 1"=50'
 W.O. NO.: 05-01.00

1 SHEET OF 2

OWNER / DEVELOPER
 THE PRESERVE AT WAVERLY GLEN, LLC
 3675 PARK AVENUE, SUITE 301
 ELLICOTT CITY, MARYLAND 21043
 (410) 480-0023

REVIEWED FOR HOWARD SCD AND MEETS TECHNICAL REQUIREMENTS

Jim Meyer 9/30/05
 USDA-NATURAL RESOURCES CONSERVATION SERVICE

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT

John K. Thornton 9-30-05
 HOWARD SCD

ENGINEERS CERTIFICATE

I CERTIFY THAT THIS PLAN FOR SEDIMENT AND EROSION CONTROL REPRESENTS A PRACTICAL, WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT.

Robert H. Vogel 9/22/05
 ROBERT H. VOGEL, PE #16193

DEVELOPER'S CERTIFICATE

I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN FOR SEDIMENT AND EROSION CONTROL, AND THAT ALL RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HOWARD SOIL CONSERVATION DISTRICT.

Michael L. Pfau 9/22/05
 MICHAEL L. PFAU