

DEPT. 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

B11000308  
PERMIT NUMBER

Building Address  
14396 TRIADDELPHIA RD  
GLENELG MD 21737

Suite/Apt. #:  
SDP/WP/Petition #:

Census Tract  
Subdivision

Section  
Area  
Lot

Tax Map  
Parcel  
Grid

Zoning  
Map Coordinates  
Lot Size

Existing Use  
SFD  
Proposed Use  
ELEVATED STONE PATIO (24")  
Estimated Construction Cost \$  
37,000  
Description of Work  
360 SQ. FT. OF STONE PATIO  
24" ABOVE GROUND WITH (18") SITTING WALLS  
AT EDGE AND 420 SQ. FT. GROUND LEVEL PATIO  
+ OUTDOOR FIRE PLACE.  
Occupant or Tenant

Contact Name

Address

City  
State  
Zip Code

Phone  
Fax

Property Owner's Name  
RON WILCOX  
Address  
14396 TRIADDELPHIA RD.  
City  
GLENELG State  
MD Zip Code  
21737  
Home Phone  
(410) 489 2950 Work Phone  
Applicant's Name & Mailing Address, (if other than stated herein):

Phone  
Fax

Contractor Company  
CLASSIC DESIGN GROUP INC.  
Contact Person  
LUIS BALDERRAMA  
Address  
5433 WOODSINE RD  
City  
WOODSINE State  
MD Zip Code  
21797  
License No.  
83116  
Phone  
(410) 549 5050 Fax  
(410) 549 5449

Engineer or Architect Company

Contact Person

Address

City  
State  
Zip Code

Phone  
Fax

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics

Utilities

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Utilities

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

LUIS BALDERRAMA  
Print Name

Email Address

1/26/11  
Date

Title/Company

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

AGENCY  
Land Development, DPZ

DATE  
1/20/11

SIGNATURE APPROVAL  
R. Buck

State Highways

Building Officials

Dev. Engineering, DPZ

Health

Fire Protection

Is Sediment Control approval required prior to issuance?  
YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐  
ONE STOP SHOP: ☐

Distribution of Copies  
T:\Operations\Updated forms

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

PROPERTY ID #

Filing fee \$

Permit fee \$

Excise tax \$

Add'l per fee \$

TOTAL FEES \$

Sub-total paid \$

Balance due \$

Check #

Validation #

Accepted by

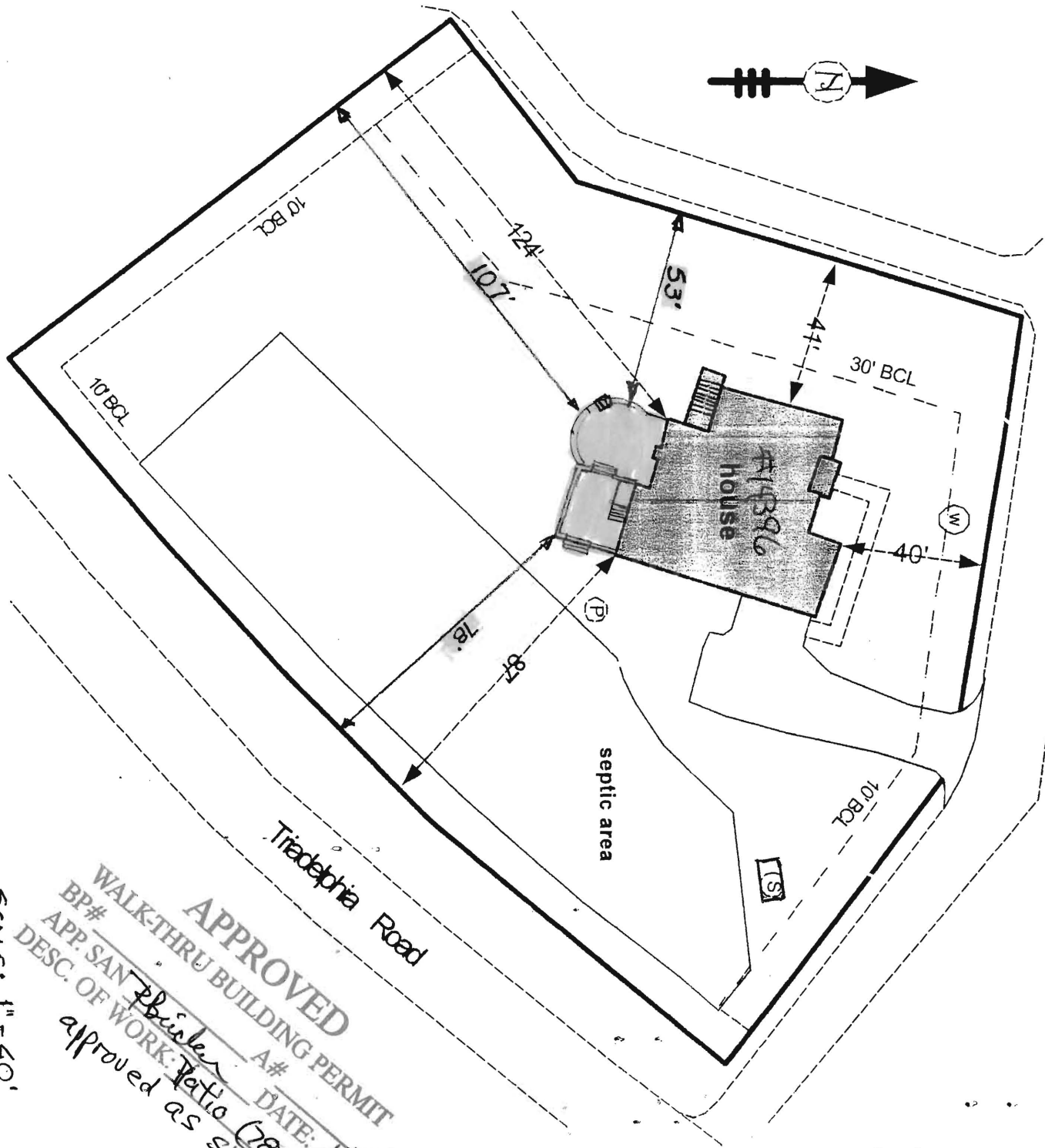
Green: LDD, DPZ

Yellow: DED, DPZ

Pink: Health

Gold: SHA

14896 Tradephia Road



**APPROVED**

WALK-THRU BUILDING PERMIT  
BP# \_\_\_\_\_ A# \_\_\_\_\_  
DATE: 1/28/2011  
APP. SAN Phisher  
DESC. OF WORK: Ratio (280 sq. ft., total)  
approved as shown

SCALE: 1" = 40'

DEPT. 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  
B10001388

Building Address 14396 TOWNE LANE RD  
GLENLEIGH MD 21077

Suite/Apt. #: SDP/WP/Petition #:

Census Tract Subdivision WINDFIELD, II

Section 1 Area Lot 8005.9

Tax Map 21 Parcel 96 Grid 01-58-9

Zoning Map Coordinates Lot Size

Existing Use NEW RESIDENTIAL CONSTRUCTION

Proposed Use PROPOSED TRUCK INSTALL

Estimated Construction Cost \$ 4000

Description of Work INSTALL 500 GALLON UNDERGROUND PLASTIC TRUCK WASH 12' WIDE 6'5" DEEP TO 11'11"

Occupant or Tenant

Contact Name

Address

City State Zip Code

Phone Fax

Property Owner's Name BY OWNER

Address 6085 MARSHALL LANE

City ELLENDALE State MD Zip Code 21075

Home Phone Work Phone

Applicant's Name & Mailing Address, (if other than stated herein):

Phone 410 379-5956 Fax 410 379-2430

Contractor Company VILLY NATIONAL GAS

Contact Person WILLIAM PERLWIG

Address 7201 MONTVILLO RD

City JESUP State MD Zip Code 20794

License No. 67793

Phone 410 799-1114 Fax 410 799-0535

Engineer or Architect Company

Contact Person

Address

City State Zip Code

Phone Fax

BUILDING DESCRIPTION - COMMERCIAL

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 No

Gas Yes No

Heating System:

Electric Oil

Natural Gas

Propane Gas

Sprinkler system: N/A

Full

Partial

Other Suppression

# of Heads

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

SF Dwelling SF Townhouse

Depth Width

1st floor:

2nd floor:

Basement:

Finished Basement Unfinished Basement Crawl space Slab on Grade

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 No

Gas Yes No

Heating System:

Electric Oil

Natural Gas

Propane Gas

Sprinkler system: N/A

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

Print Name

Email Address

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

Land Development, DPZ

State Highways

Building Officials

Dev. Engineering, DPZ

Health 5/25/10

Fire Protection

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

Filing fee

Permit fee

Excise tax

Add'l per fee

TOTAL FEES

Sub-total paid

Balance due

Check

Validation

Accepted by

Distribution of Copies

White: Building Officials

Green: LDD, DPZ

Yellow: DED, DPZ

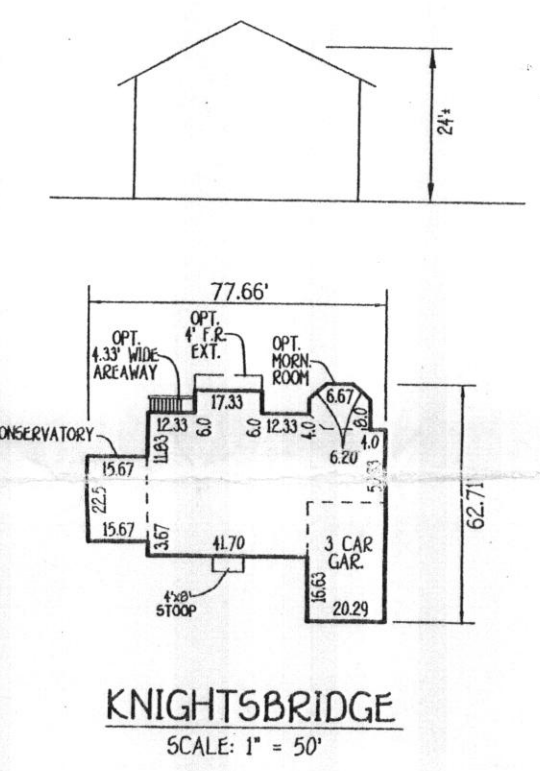
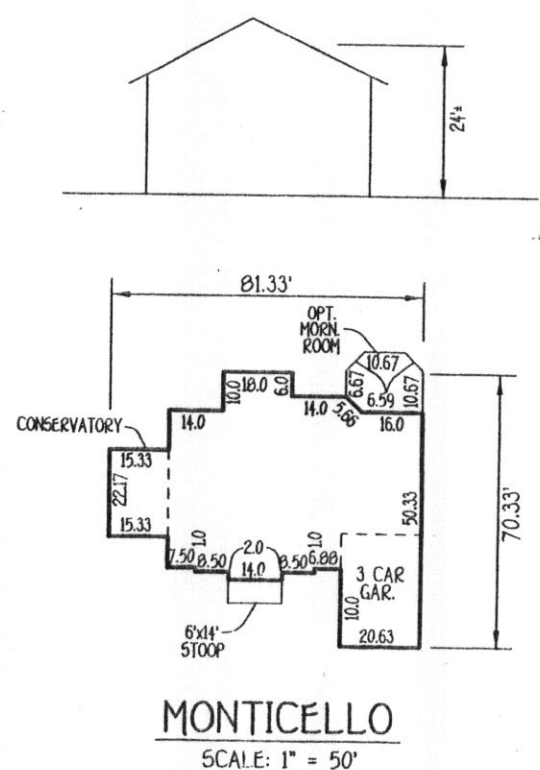
Pink: Health

Gold: SHA



| LEGEND |                                |
|--------|--------------------------------|
| SYMBOL | DESCRIPTION                    |
| ---    | EXISTING 2' CONTOURS           |
| ---    | EXISTING 10' CONTOURS          |
| ---    | EXISTING TREE LINE             |
| +      | SPOT ELEVATION                 |
| ---    | PROPOSED 2' INTERVAL           |
| ---    | PROPOSED 10' INTERVAL          |
| ---    | PROPOSED TREE PROTECTION FENCE |
| ---    | PROPOSED SUPER SILT FENCE      |
| ---    | PROPOSED LIMITS OF DISTURBANCE |

DENOTES PROPOSED WELL  
 DENOTES PASSED PERC



**NOTE: LOT 5**  
 THE EXISTING WELL SHOWN ON THIS PLAN, TAG NO. HO-95-1362 HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.

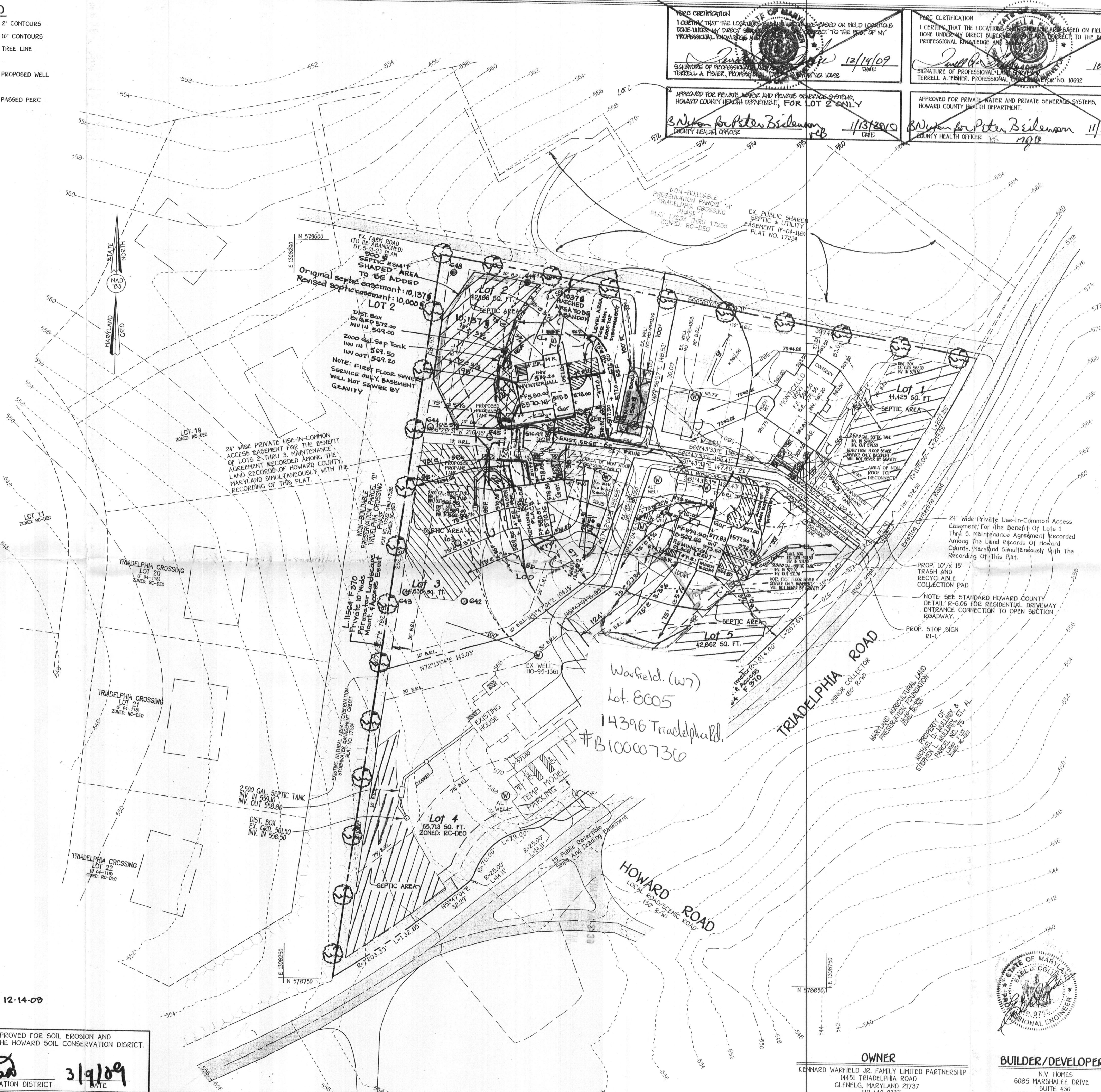
| ADDRESS CHART |                  |
|---------------|------------------|
| LOT NUMBER    | STREET ADDRESS   |
| LOT 1         | TRIADELPHIA ROAD |
| LOT 2         | TRIADELPHIA ROAD |
| LOT 3         | TRIADELPHIA ROAD |
| LOT 5         | TRIADELPHIA ROAD |

| INDEX CHART |   |
|-------------|---|
| SHEET       | DESCRIPTION   |
| SHEET 1     | TITLE SHEET, HOUSE TYPE, SITE DEVELOPMENT, SEDIMENT/EROSION CONTROL |
| SHEET 2     | SEDIMENT/EROSION CONTROL NOTES & DETAILS                            |

When Note #1, septic tank size & added well note for Lot 5 4-14-10 house type & qrd, Lot 5, incl. SWM disconnect.  
 se type & qrd, Lot 2 incl. revision to well box and septic. csm't 12-14-09  
 se type & qrd, Lot 2 11-19-09  
 se type, Lot 3 and add 2 alt. wells. locations 10-29-09

ER, COLLINS & CARTER, INC.  
 ENGINEERING CONSULTANTS & LAND SURVEYORS  
 100 SQUARE OFFICE PARK - 10072 BALTIMORE NATIONAL PIKE  
 ELICOTT CITY, MARYLAND 21042  
 (410) 418 - 2895

THIS DEVELOPMENT IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.  
 APPROVED: *[Signature]* 3/19/09  
 HOWARD SOIL CONSERVATION DISTRICT

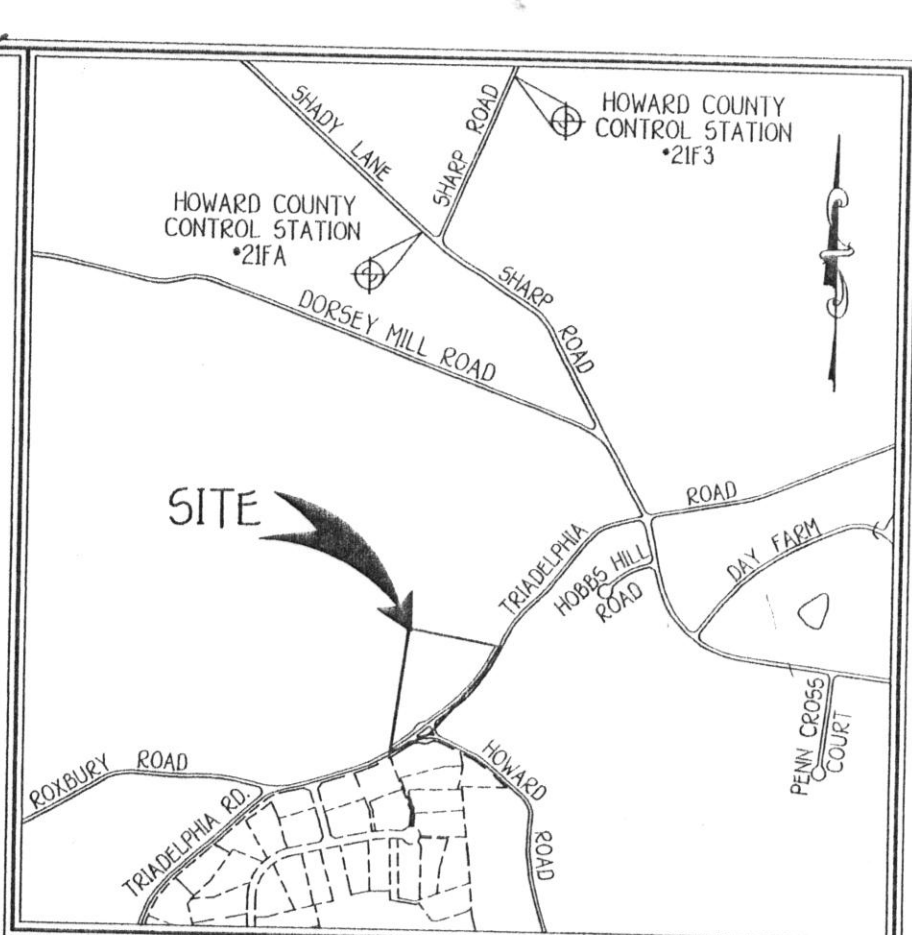


**PERC CERTIFICATION**  
 I CERTIFY THAT THE LOCATIONS AND DEPTHS OF THE EXISTING AND PROPOSED WELLS SHOWN ON THIS PLAN HAVE BEEN FIELD LOCATED BY ME OR UNDER MY DIRECT SUPERVISION AND TO THE BEST OF MY PROFESSIONAL KNOWLEDGE AND BELIEF THEY ARE ACCURATELY SHOWN.  
 SIGNATURE OF PROFESSIONAL LAND SURVEYOR: *[Signature]* DATE: 12/14/09  
 TERRELL A. FISHER, PROFESSIONAL LAND SURVEYOR, LICENSE NO. 10692

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT, FOR LOT 2 ONLY  
 SIGNATURE OF COUNTY HEALTH OFFICER: *[Signature]* DATE: 1/13/2010  
 COUNTY HEALTH OFFICER

**PERC CERTIFICATION**  
 I CERTIFY THAT THE LOCATIONS AND DEPTHS OF THE EXISTING AND PROPOSED WELLS SHOWN ON THIS PLAN HAVE BEEN FIELD LOCATED BY ME OR UNDER MY DIRECT SUPERVISION AND TO THE BEST OF MY PROFESSIONAL KNOWLEDGE AND BELIEF THEY ARE ACCURATELY SHOWN.  
 SIGNATURE OF PROFESSIONAL LAND SURVEYOR: *[Signature]* DATE: 12/29/09  
 TERRELL A. FISHER, PROFESSIONAL LAND SURVEYOR, LICENSE NO. 10692

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT.  
 SIGNATURE OF COUNTY HEALTH OFFICER: *[Signature]* DATE: 11/16/2009  
 COUNTY HEALTH OFFICER



- GENERAL NOTES**
- SUBJECT PROPERTY ZONED: RC-DEO
  - TOTAL AREA OF PROPERTY: 4.00 ACRES
  - SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT REVIEW.
  - LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
  - CONTRACTOR/BUILDER TO VERIFY ELEVATION IN THE FIELD BEFORE BEGINNING ANY CONSTRUCTION.
  - TOPOGRAPHY IS BASED ON AERIAL TOPOGRAPHY DONE BY HARFORD AERIAL DATED 2002
  - NO WETLANDS CURRENTLY EXIST ON THE PROPERTY.
  - STORMWATER MANAGEMENT IS PROVIDED BY NON-ROOFTOP DISCONNECTED AND THE USE OF A LEVEL SPREADER.
  - PERIMETER LANDSCAPING SHOWN PER F-07-39.

- REVISED PERCOLATION CERTIFICATION NOTES**
- THIS AREA DESIGNATES A PRIVATE SEWAGE AREA OF AT LEAST 10,000 SQUARE FEET
  - AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. 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 SEWAGE EASEMENT RECORDED OF A REVISED SEWAGE SHALL NOT BE NECESSARY.
  - TOPOGRAPHY SHOWN IS AT TWO-FOOT CONTOUR INTERVALS AND HAS BEEN FIELD VERIFIED.
  - ANY CHANGES TO A PRIVATE SEWAGE AREA SHALL REQUIRE A REVISED PERC CERTIFICATION PLAN.
  - EXISTING WELLS, SEPTIC SYSTEMS, AND SEWAGE DISPOSAL AREAS WITHIN 100' OF THE PROPERTY AND THOSE WITHIN 200' DOWN GRADIENT OF EXISTING OR PROPOSED SEPTIC SYSTEMS OR SEWAGE DISPOSAL AREAS HAVE BEEN SHOWN.
  - THE PURPOSE FOR THIS REVISION IS TO RECONFIGURE THE SEPTIC ESM'T. & WELL BOX LOC.
  - THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT NO. HO-95-1362. REFER TO PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS ANY RESTRICTIONS, AND PROVISIONS.

**DEVELOPER'S CERTIFICATE**  
 I HEREBY CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN AND THAT ANY 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.  
 SIGNATURE OF DEVELOPER: *[Signature]* DATE: 3/5/09  
 TM NAUGHTON

**ENGINEER'S CERTIFICATE**  
 I HEREBY CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITION AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT.  
 SIGNATURE OF ENGINEER: *[Signature]* DATE: 3-5-09  
 EARL D. COLLINS

**PROFESSIONAL CERTIFICATION**  
 I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 9753, EXPIRATION DATE: 2/28/10.  
 SIGNATURE OF PROFESSIONAL ENGINEER: *[Signature]* DATE: 3-5-09  
 EARL D. COLLINS

**NOTE:**  
 THE EXISTING WELLS SHOWN ON THIS PLAN NO'S HO-95-1350, HO-95-1359, HO-95-1360, AND HO-95-1362 HAVE BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY LOCATED.

SITE DEVELOPMENT  
 & SEDIMENT/EROSION CONTROL PLAN  
**THE WARFIELDS II**  
 LOTS 1 THRU 3, AND 5  
 SECTION ONE  
 TAX MAP NO.: 21 ZONED: RC-DEO PARCEL NO.: 96  
 4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
 SCALE: 1" = 50' DATE: FEBRUARY, 2009  
 SHEET 1 OF 2



**OWNER**  
 KENNARD WARFIELD JR. FAMILY LIMITED PARTNERSHIP  
 14451 TRIADELPHIA ROAD  
 GLENELG, MARYLAND 21737  
 410-442-2337

**BUILDER/DEVELOPER**  
 N.V. HOMES  
 6085 MARSHALLEE DRIVE  
 SUITE 430  
 ELK RIDGE, MARYLAND 21075  
 410-796-5956



|   |  |  |  |                           |  |
|---|--|--|--|---------------------------|--|
| DEPT. OF INSPECTIONS, LICENSES AND PERMITS<br>3430 COURT HOUSE DRIVE<br>ELLICOTT CITY, MD 21043<br>PERMITS (410) 313-2455<br>INSPECTIONS (410) 313-1810<br>AUTOMATED INFORMATION (410) 313-3800 |  | HOWARD COUNTY<br>PERMIT APPLICATION<br>609000285 |  | PERMIT NUMBER<br>21000736 |  |
| Building Address <u>14396 Triadelphia Road</u><br><u>Glenelg, MD 21737</u>  |  |  | Property Owner's Name <u>NVR, Inc.</u><br>Address <u>6085 Marshalee Dr. Suite 130</u><br>City <u>Elkridge</u> State <u>MD</u> Zip Code <u>21075</u><br>Home Phone _____ Work Phone <u>410-379-5956</u><br>Applicant's Name & Mailing Address, (if other than stated herein):<br><u>Jim Kerwin</u><br><u>P.O. Box 552</u><br><u>Woodbine, MD 21797</u><br>Phone <u>443-309-7792</u> Fax <u>410-489-6550</u> |                           |  |
| Suite/Apt. #: _____ SDP/WP/Petition #: _____  |  |  |  |                           |  |
| Census Tract _____ Subdivision <u>Warfields II</u>  |  |  |  |                           |  |
| Section _____ Area _____ Lot <u>5</u>   |  |  |  |                           |  |
| Tax Map _____ Parcel _____ Grid _____   |  |  |  |                           |  |
| Zoning _____ Map Coordinates _____ Lot Size _____   |  |  |  |                           |  |
| Existing Use <u>Vacant lot</u>  |  |  | Contractor Company <u>NV Homes</u>   |                           |  |
| Proposed Use <u>Single family home</u>  |  |  | Contact Person <u>Matthew Atwell</u>   |                           |  |
| Estimated Construction Cost \$ <u>250,000</u>   |  |  | Address <u>6085 Marshalee Drive Suite 130</u>  |                           |  |
| Description of Work <u>New 2 story "Bramington Place" with 2 car garage, master room, 4'x10' to family room, unfinished basement</u>  |  |  | City <u>Elkridge</u> State <u>MD</u> Zip Code <u>21075</u>   |                           |  |
| Occupant or Tenant _____  |  |  | License No. <u>560</u>   |                           |  |
| Contact Name _____  |  |  | Phone <u>410-379-5956</u> Fax <u>410-379-2430</u>  |                           |  |
| Address _____   |  |  | Engineer or Architect Company _____  |                           |  |
| City _____ State _____ Zip Code _____   |  |  | Contact Person _____   |                           |  |
| Phone _____ Fax _____   |  |  | Address _____  |                           |  |
|   |  |  | City _____ State _____ Zip Code _____  |                           |  |
|   |  |  | Phone _____ Fax _____  |                           |  |

| BUILDING DESCRIPTION - COMMERCIAL   |   | BUILDING DESCRIPTION - RESIDENTIAL   |   |
|---|---|--|---|
| <b>Building Characteristics</b>   | <b>Utilities</b>  | <b>Building Characteristics</b>  | <b>Utilities</b>  |
| Height: _____   | Water Supply: _____<br>Public _____ Private _____   | SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>   | Water Supply: _____<br>Public <input checked="" type="checkbox"/> Private _____   |
| No. of stories: _____   | Sewage Disposal: _____<br>Public _____ Private _____  | Depth _____ Width _____  | Sewage Disposal: _____<br>Public <input checked="" type="checkbox"/> Private _____  |
| Gross area, sq. ft. per floor: _____  | Electric Yes <input type="checkbox"/> No <input type="checkbox"/>   | 1 <sup>st</sup> floor: <u>66 x 54</u>  | Electric Yes <input type="checkbox"/> No <input type="checkbox"/>   |
| Use group: _____  | Gas Yes <input type="checkbox"/> No <input type="checkbox"/>  | 2 <sup>nd</sup> floor: <u>32 x 54</u>  | Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>   |
| Construction type: _____<br>Reinforced Concrete _____<br>Structural Steel _____<br>Masonry _____<br>Wood Frame _____<br>State Certified Modular _____ | Heating System: _____<br>Electric <input type="checkbox"/> Oil <input type="checkbox"/><br>Natural Gas <input type="checkbox"/><br>Propane Gas <input type="checkbox"/> | Basement: <u>56 x 54</u><br>Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> | Heating System: _____<br>Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/><br>Natural Gas <input checked="" type="checkbox"/><br>Propane Gas <input type="checkbox"/> |
|   | Sprinkler system: N/A <input type="checkbox"/><br>Full _____<br>Partial _____<br>Other Suppression _____<br># of Heads _____  | No. of Bedrooms <u>4</u>   | Sprinkler system: N/A <input checked="" type="checkbox"/><br>NFPA #13D _____<br>NFPA #13R _____<br>Other: _____   |
|   |   | Multi-family dwellings:<br>No. of efficiency units: _____<br>No. of 1 BR units: _____<br>No. of 2 BR units: _____<br>No. of 3 BR units: _____  |   |
|   |   | Other Structure: _____<br>Dimensions: _____<br>Footings: _____<br>Roof: _____  |   |
|   |   | State Certified Modular _____<br>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 Jim Kerwin Print Name Jim Kerwin  
Email Address \_\_\_\_\_  
Title/Company 14396/100 H. Kerwin Date 3/29/2010

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
\*\*PLEASE WRITE NEATLY AND LEGIBLY.\*\*

- FOR OFFICE USE ONLY -

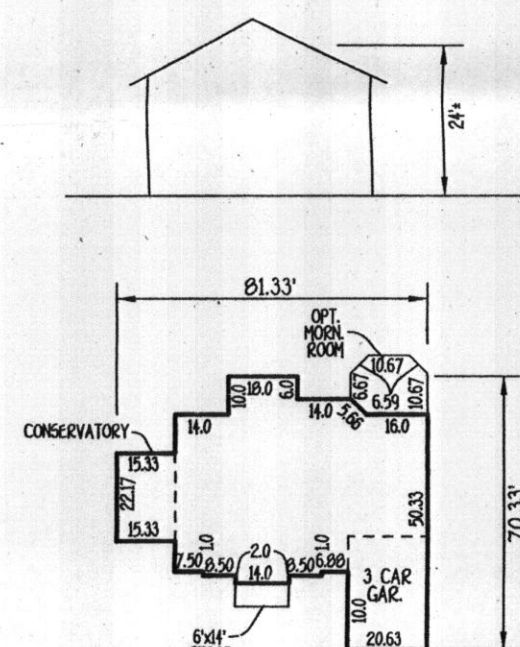
| AGENCY   | DATE | SIGNATURE         | APPROVAL | DPZ SETBACK INFORMATION                                  | Filing fee     | PROPERTY ID # |
|--|------|-------------------|----------|--|----------------|---------------|
| Land Development, DPZ                                    |      |                   |          | Front: _____   | \$             |               |
| State Highways   |      |                   |          | Rear: _____  | Permit fee     | \$            |
| Building Officials                                       |      |                   |          | Side: _____  | Excise tax     | \$            |
| Dev. Engineering, DPZ                                    |      |                   |          | Side St.: _____  | Add'l per fee  | \$            |
| Health <u>4/15/2010</u>                                  |      | <u>R. Buckner</u> |          | All minimum setbacks met?                                | TOTAL FEES     | \$            |
| Fire Protection  |      |                   |          | YES <input type="checkbox"/> NO <input type="checkbox"/> | Sub-total paid | \$            |
| Is Sediment Control approval required prior to issuance? |      |                   |          | Is Entrance Permit Required?                             | Balance due    | \$            |
| YES <input type="checkbox"/> NO <input type="checkbox"/> |      |                   |          | YES <input type="checkbox"/> NO <input type="checkbox"/> | Check          | #             |
|  |      |                   |          | Historic District?                                       | Validation     | #             |
|  |      |                   |          | YES <input type="checkbox"/> NO <input type="checkbox"/> |                |               |
| CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> |      |                   |          | Lot Coverage for New Town Zone                           |                |               |
| ONE STOP SHOP: <input type="checkbox"/>                  |      |                   |          | SDP/Red-line approval date                               | Accepted by    |               |



| SYMBOL | DESCRIPTION           |
|--------|-----------------------|
| ---    | EXISTING 2' CONTOURS  |
| ---    | EXISTING 10' CONTOURS |
| ---    | EXISTING TREE LINE    |
| +      | SPOT ELEVATION        |
| ---    | TREE PROTECTION FENCE |
| ---    | SUPER SILT FENCE      |
| ---    | LIMITS OF DISTURBANCE |

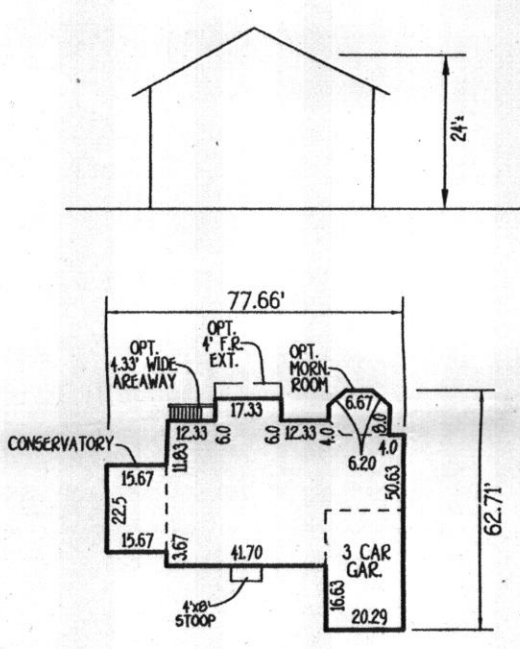
# LEGEND

- EXISTING 2' CONTOURS
- EXISTING 10' CONTOURS
- EXISTING TREE LINE
- DENOTES PROPOSED WELL
- DENOTES PASSED PERC



MONTICELLO

SCALE: 1" = 50'



KNIGHTSBRIDGE

SCALE: 1" = 50'

## NOTE: LOT 5

THE EXISTING WELL SHOWN ON THIS PLAN, TAG NO. HO-95-1962 HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.

| LOT NUMBER | STREET ADDRESS    |
|------------|-------------------|
| LOT 1      | TRIADDELPHIA ROAD |
| LOT 2      | TRIADDELPHIA ROAD |
| LOT 3      | TRIADDELPHIA ROAD |
| LOT 5      | TRIADDELPHIA ROAD |

## ADDRESS CHART

| SHEET   | DESCRIPTION   |
|---------|---|
| SHEET 1 | TITLE SHEET, HOUSE TYPE, SITE DEVELOPMENT, SEDIMENT/EROSION CONTROL |
| SHEET 2 | SEDIMENT/EROSION CONTROL NOTES & DETAILS                            |

## INDEX CHART

- 5 Rev. Gen. Note #1, septic tank size & added well note for Lot 5 4-14-10
- 4 Rev. house type & qrd, Lot 5, incl. SWM disconnect.
- 3 Rev. hse type & qrd, Lot 2 incl. revision to well box and septic. csm't 12-14-09
- 2 Rev. hse type & qrd, Lot 2 11-19-09
- 1 Rev. hse type, Lot 3 and add 2 alt. wells, locations 10-29-09

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

3/9/09  
DATE

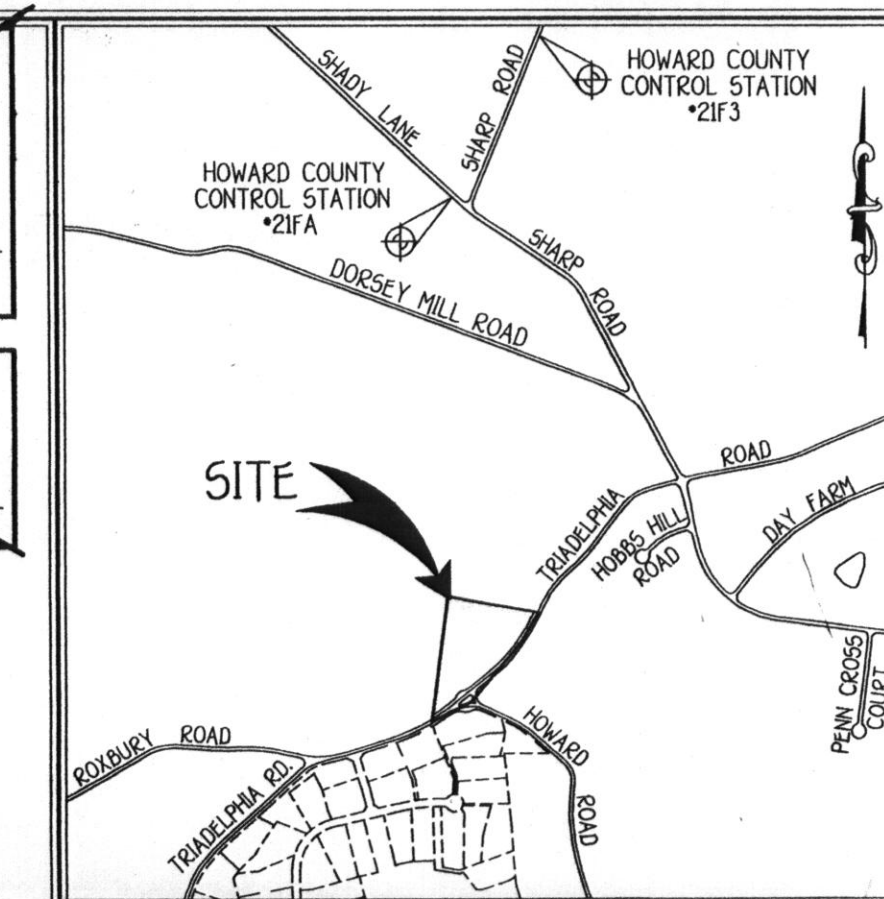
FISHER, COLLINS & CARTER, INC.  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTRAL SQUARES OFFICE PARK - 10722 BALTIMORE NATIONAL PIKE  
ELLCOTT CITY, MARYLAND 21042  
(410) 461-2895

PERC CERTIFICATION  
I CERTIFY THAT THE LOCATIONS OF THE EXISTING WELLS SHOWN ON THIS PLAN NO. HO-95-1962 HAVE BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.  
TERRELL A. FISHER, PROFESSIONAL LAND SURVEYOR  
12/14/09  
DATE

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT, FOR LOT 2 ONLY  
B. N. Peters, B.S. in Civil Engineering  
COUNTY HEALTH OFFICER  
11/13/2009  
DATE

PERC CERTIFICATION  
I CERTIFY THAT THE LOCATIONS OF THE EXISTING WELLS SHOWN ON THIS PLAN NO. HO-95-1962 HAVE BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.  
TERRELL A. FISHER, PROFESSIONAL LAND SURVEYOR  
10/29/09  
DATE

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT.  
B. N. Peters, B.S. in Civil Engineering  
COUNTY HEALTH OFFICER  
11/16/2009  
DATE



VICINITY MAP

SCALE: 1" = 1200'

## GENERAL NOTES

- SUBJECT PROPERTY ZONED: RC-DEO
- TOTAL AREA OF PROPERTY: 4.00 ACRES
- SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT REVIEW.
- LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
- CONTRACTOR/BUILDER TO VERIFY ELEVATION IN THE FIELD BEFORE BEGINNING ANY CONSTRUCTION.
- TOPOGRAPHY IS BASED ON AERIAL TOPOGRAPHY DONE BY HARFORD AERIAL DATED 2002.
- NO WETLANDS CURRENTLY EXIST ON THE PROPERTY.
- STORMWATER MANAGEMENT IS PROVIDED BY NON-ROOFTOP DISCONNECTED AND THE USE OF A LEVEL SPREADER.
- PERIMETER LANDSCAPING SHOWN PER F-07-39.

## REVISED PERCOLATION CERTIFICATION NOTES

- THIS AREA DESIGNATES A PRIVATE SEWAGE AREA OF AT LEAST 10,000 SQUARE FEET
- AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. 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 SEWAGE EASEMENT RECORDATION OF A REVISED SEWAGE SHALL NOT BE NECESSARY.
- ANY CHANGES TO A PRIVATE SEWAGE AREA SHALL REQUIRE A REVISED PERC CERTIFICATION PLAN.
- EXISTING WELLS, SEPTIC SYSTEMS, AND SEWAGE DISPOSAL AREAS WITHIN 100' OF THE PROPERTY AND THESE WITHIN 500' DOWN GRADIENT OF EXISTING OR PROPOSED SEPTIC SYSTEMS OR SEWAGE DISPOSAL AREAS HAVE BEEN SHOWN.
- THE PURPOSE FOR THIS REVISION IS TO RECONFIGURE THE SEPTIC EASEMENT, A WELL BOX, LOC.
- THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT NO. 89955, REFER TO PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS ANY RESTRICTIONS, AND PROVISIONS.

## DEVELOPER'S CERTIFICATE

I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN AND THAT ANY 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.

3/5/09  
DATE

## ENGINEER'S CERTIFICATE

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

3-5-09  
DATE

## PROFESSIONAL CERTIFICATION

I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 9753, EXPIRATION DATE: 2/28/10.

3-5-09  
DATE

NOTE: THE EXISTING WELLS SHOWN ON THIS PLAN NO. HO-95-1962, HO-95-1359, HO-95-1360, AND HO-95-1362 HAVE BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY LOCATED.

## SITE DEVELOPMENT & SEDIMENT/EROSION CONTROL PLAN THE WARFIELDS II LOTS 1 THRU 3, AND 5 SECTION ONE

TAX MAP NO. 21 ZONED: RC-DEO PARCEL NO. 96  
4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
SCALE: 1" = 50' DATE: FEBRUARY, 2009

SHEET 1 OF 2

## OWNER

KENNARD WARFIELD JR. FAMILY LIMITED PARTNERSHIP  
14451 TRIADDELPHIA ROAD  
SUITE 430  
GLENELG, MARYLAND 21737  
410-442-2337

## BUILDER/DEVELOPER

N.V. HOMES  
6005 MARSHALLEE DRIVE  
SUITE 430  
ELK RIDGE, MARYLAND 21075  
410-796-5956



G.P. 09-48