

G 9221

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
3430 COURT HOUSE DRIVE  
ELLCOTT CITY, MD 21043  
PERMITS (410) 313-2655 INSPECTIONS (410) 313-1810  
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER

1300158483

Building Address 12055 Windsor Moss  
Ellicott City, MD 21042  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: SDP-03-030  
Census Tract 603000 Subdivision Homeland  
Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 15  
Tax Map 16 Parcel 209 Grid 122  
Zoning RC Map Coordinates GA7 Lot size \_\_\_\_\_

Property Owner's Name NVR Inc.  
Address 6085 Marshalee Dr. Ste 130  
City Elkridge State MD Zip Code 21075  
Home Phone \_\_\_\_\_ Work Phone 410-379-5956  
Applicant's Name & Mailing Address: (if other than stated hereon):  
KS Cecil - Permit App Services  
Phone 443-994-9702 Fax \_\_\_\_\_

Existing Use Vacant Lot  
Proposed Use SFTM  
Estimated Construction Cost \$ 150000  
Description of Work "Bella Via" - 2 story  
full bsmt - 7R - 2FB, 1MB - ~~5MB~~  
lot - 2 Car Garage - 2BB - FP

Contractor Company NVR Inc.  
Contact Person Kimberly Cecil  
Address 1601 Lewinville Rd.  
City Mechanic State VA Zip Code 22101  
License No. 56  
Phone 443-994-9702 Fax \_\_\_\_\_

Occupant or Tenant \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

**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 Characteristics**  
SF Dwelling  Townhouse   
Depth \_\_\_\_\_ Width \_\_\_\_\_  
1st floor: 35 32  
2nd floor: 44 32  
Basement: 35 32  
Finished Basement  Unfinished Basement   
Crawl space  Slab on Grade   
No. of Bedrooms 2  
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

**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: see den 9940

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 ON TO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature [Signature]  
Title/Company NVR Inc.

Print Name KS Cecil Agent NVR Inc.  
Date 3-10-06

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 4/3/06 [Signature]  
Dev. Engineering, DPZ \_\_\_\_\_  
Health 4/20/06 [Signature]  
Fire Protection \_\_\_\_\_  
Is Sediment Control approval required prior to issuance?  
YES  NO   
CONTINGENCY CONSTRUCTION START:   
ONE STOP SHOP:

DPZ SETBACK INFORMATION  
Front: \_\_\_\_\_ Filing fee \$ 100  
Rear: \_\_\_\_\_ Permit fee \$ 822  
Side: \_\_\_\_\_ Excise tax \$ 3921  
Side St.: \_\_\_\_\_ Add'l per. fee \$ 84  
All minimum setbacks met? TOTAL FEES \$ 5048  
YES  NO   
Is Entrance Permit required? Sub-total paid \$ \_\_\_\_\_  
YES  NO  Balance due \$ \_\_\_\_\_  
Check # \_\_\_\_\_  
Validation # \_\_\_\_\_

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA  
T:\norm\PERMIT.FRM Accepted by [Signature]  
Rev. 11/4/04

Lot 15 Block —

Community ELLICOTT MEADOWS

**BEDROOM RESTRICTION ACKNOWLEDGMENT**  
Ellicott Meadows

The undersigned Purchaser has entered into a Purchase Agreement for the Property known as 12055 Windsor Moss and located in the Ellicott Meadows Community (the "Property").

By signing below, Purchaser acknowledges they have been informed of and understand the following information relating to the Property:

The Ellicott Meadows is served by a community private sewage disposal system which can only accommodate a maximum of two bedrooms per Unit. The Declaration of Covenants, Conditions and Restrictions recorded against the Units at Ellicott Meadows, as amended, states that "...no Condominium Unit shall be constructed or modified to contain more than two (2) bedrooms." The Condominium Association is the entity which enforces the terms of the Declaration.

ACKNOWLEDGED BY PURCHASER:

Purchaser: Mary Ann Beatty

Purchaser: \_\_\_\_\_

Date: 12/28/05



## HOWARD COUNTY HEALTH DEPARTMENT

Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia MD 21046  
(410) 313-2640 FAX (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-877-4MD-DHMH

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***Penny E. Borenstein, M.D., M.P.H., County Health Officer***

August 28, 2006

NVR Inc. t/a Ryan Homes  
6085 Marshalee Drive, Suite 130  
Elkridge, Maryland 21075

***SENT VIA FACSIMILE 410-796-7094***

RE: Homeland, Lot 15  
12055 Windsor Moss  
Ellicott City, MD 21042  
BP # B00158483  
**PUBLIC WATER**

Dear Sirs or Madam:

This is to advise that the connection from the house to the street has been installed and inspected for the referenced property. A Community Septic System serves this dwelling. **Final approval was granted on 08/16/2006 by HCHD for the house connection.**

The property is served by public water and is therefore exempt from the Health Department water sampling requirements.

By issuance of this letter, this office recommends release of the Use and Occupancy permit for the referenced property.

### RECOMMENDATION FOR USE AND OCCUPANCY

Respectfully,

Stuart F. Oster, R. S.  
Well and Septic Program

cc: DILP, Building Inspectors Office  
File