B00009071 -751 HB 50 PECTIONS, LICENSES AND PER SOURT HOUSE DRIVE 20TT CITY, MO 21043 2455 NSPECTIONS (410) 313-11 HOWARD COUNTY PERMIT NUMBER PERMIT APPLICATION 60× 6888 Property Owner's Name NUR JUC / FYAN HOM/S Building Address 11812 LILLIN PANCH Address 6085 mytreshire Direct Str 140 ELLICOTT CTTY 21645 MD Suite/Apt. #: A./A SDP/WP/Petition #: 62-30 Census Tract 603000 Subdivision HUMEI AUD City ICKAIDER State AND. Zip Code 2/075 Home Phone _____ Work Phone _____ 767 Applicant's Name & Mailing Address, (if other than stated hereon): Section A/4 Area NA 50 Int Tax Map /C Grid 16 Parcel 51 Fax4/10 - 796 . 9094 Zoning Map Coordinates 617 Lot size Phone Existing Use VICAUT LOT Contractor Company LIVE TWC/AYAN HANTS Proposed Use SFD- CONDO Contact Person BLYAN PATEALLY Estimated Construction Cost \$ _____200,000 Description of Work 2 STER4, SPRINGSDUCK, FULL SSMT LEWISVILLE RD 7601 Address (total FINISHED ESIMT, 310, 1113, 2 CHE GIR, 8R, MELIAN 21012 City TRANSFER State APP Zip Code The License No. MIM # 56 Phone 410-746-0400 Fax 410-7% 20% 2 BUSTORM, MOZONDEN, J'ENT. BEK 18/2X12 Engineer or Architect Company Occupant or Tenant Contact Name_ **Contact Person** 17.51 Address Address 7051 State Citv Zip Code State Zip Code City t's Phone Fax Service A 10 Fax Phone BUILDING DESCRIPTION - COMMERCIAL BUILDING DESCRIPTION - RESIDENTIAL 50 **Building Characteristics** Utilities **Building Characteristics** Utilities Water Supply: Water Supply: ____Public Height: SF Dwelling SF Townhouse Go' Width _ Private No. of stories: Private 1st floor: 5: Sewage Disposal: Public Sewage Disposal: Public 22' 2nd floor: 50' Basement: 67 CI A Private St. Mic Gross area, sq. ft. per floor: Private Electric Yes Vo D Gas Yes Vo D Electric Yes I No I Gas Yes I No I Height: Multi-family d Use group: Heating System: Electric D Oil D Natural Gas D Propane Gas D No. of efficiency No. of 1 BR units No. of 2 BR units No. of 3 BR units Heating System: Electric D Oil D Construction type: _____ Reinforced Concrete _____ Structural Steel Natural Gas Propane Gas 🛛 Masonry Wood Frame Sprinkler system: N/A X Sprinkler system; N/A ns: gs: <u>IGXX 201</u> teight: 201 Full NFPA #13R Partial Other: State Certified Modular Other Suppression # of Heads State Certified Modular Manufactured Home (1) THAT HE'SHE IS AUTHORIZED TO M SHE WILL PERFORM NO WORK ON THE D COUNTY MARCH ARE CT; (3) THAT HE/GHE WILL COMPLY WITH ALL REGILATIONS OF SED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS 1 SHIT TO PUTER 12 TUSOM olicum's Sign HEGHN Nuncs Prins Name min 13.17 Date Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY *** PLEASE WRITE NEATLY AND LEGIBLY. ** Company 77217 ONTINGENCY CONSTRUCTION START ID 120

BEDROOM RESTRICTION ACKNOWLEDGMENT Hearthstone at Ellicott Meadows

The undersigned Purchaser has entered into a Purchase Agreement for the Property known as <u>HB50</u> 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 Hearthstone at Ellicott Meadows is served by a community private sewage disposal system which can only accommodate a maximum of two bedrooms per Unit. Howard County will enforce this restriction and will not issue any building permits for modifications to any Unit where the number of bedrooms will be increased beyond two.

ACKNOWLEDGED BY PURCHASER:

Lot 50 Block

Purchaser: <u>Mary Cliffen Moren</u> Purchaser: <u>Jol Moren</u> Date: <u>10/20/2005</u>

ylor

MHBR NO. 56 10/13/05



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

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

1/9/2006

NVR Inc. t/a Ryan Homes 6085 Marshalee Drive, Suite 140 Elkridge, Maryland 21075

SENT VIA FACSIMILE 410-796-7094

RE:

Homeland, Lot 50 11812 Willow Branch Ellicott City, MD 21043 BP # B00156888 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 1/03/2006 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

neotfully. Stuart Oster, Sanitarian

Well and Septic Program

cc: DILP, Building Inspectors Office File