

Building Address: \_\_\_\_\_  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Existing Use: \_\_\_\_\_  
 Proposed Use: \_\_\_\_\_  
 Estimated Construction Cost: \$ \_\_\_\_\_  
 Description of Work: \_\_\_\_\_  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated herein):  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Contractor Company: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No. : \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 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
<b>Construction type:</b>	<b>Heating System</b>
<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	<b>Sprinkler System:</b>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> <b>Roadside Tree Project Permit</b>	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<b>Roadside Tree Project Permit #</b>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<b>Depth</b> <b>Width</b>	<input type="checkbox"/> Public
1 <sup>st</sup> floor:	<input type="checkbox"/> Private
2 <sup>nd</sup> floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<b>Heating System</b>
No. of Bedrooms:	<input type="checkbox"/> Electric
<b>Multi-family Dwelling</b>	<input type="checkbox"/> Oil
No. of efficiency units:	<input 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"/> <b>Roadside Tree Project Permit</b>
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<b>Roadside Tree Project Permit #</b>
<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** \_\_\_\_\_  
**Email Address** \_\_\_\_\_  
**Title/Company** \_\_\_\_\_

**Print Name** \_\_\_\_\_  
**Date** \_\_\_\_\_

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>10/21/11 [Signature]</u>
Fire Protection		

Is Sediment Control approval required for issuance?  Yes  No  
 CONTINGENCY CONSTRUCTION START  
 ONE STOP SHOP

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> 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	\$

Building Address: 7122 Hill Valley Rd  
Howard Co MD 21077

Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_

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

Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_

Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_

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

Property Owner's Name: Ken Cox

Address: 7122 Hill Valley Rd

City: Howard State: MD Zip Code: 21077

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein):  
 \_\_\_\_\_  
 \_\_\_\_\_

Phone: 441 306 3611 Fax: \_\_\_\_\_

Email: ken@kencox.com

Existing Use: 3rd

Proposed Use: 3rd and 4th

Estimated Construction Cost: \$ \_\_\_\_\_

Description of Work: Interior renovation of 3rd and 4th floor  
to include new carpet, paint, and  
fixtures.

Occupant or Tenant: \_\_\_\_\_

Contractor Company: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

License No.: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Was tenant space previously occupied?  Yes  No

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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"/> <u>Roadside Tree Project Permit</u>	<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 type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 <sup>st</sup> floor:	<input type="checkbox"/> Private
2 <sup>nd</sup> floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input 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"/> <u>Roadside Tree Project Permit</u>
Roof:	<input type="checkbox"/> Yes <input checked="" 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  
Ken Cox

Email Address  
ken@kencox.com

Title/Company  
 \_\_\_\_\_

Print Name  
 \_\_\_\_\_

Date  
 \_\_\_\_\_

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>12/11</u>	<u>Amel Scott</u>
Fire Protection		

Is Sediment Control approval required for 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-Ilne approval date: \_\_\_\_\_

Filing Fee	\$ <u>11.2</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

*Walk-Three*

DEPT. 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
Building Address <u>7122 Deer Valley Road</u>		Property Owner's Name <u>Kenneth Glaeck</u>	
Suite/Apt. #: _____ SDP/WP/Petition #: _____		Address <u>7122 Deer Valley Rd</u>	
Census Tract _____ Subdivision <u>Street</u>		City <u>Highland</u> State <u>MD</u> Zip Code <u>20917</u>	
Section _____ Area _____ Lot <u>Property</u>		Home Phone _____ Work Phone <u>202-549-1215</u>	
Tax Map <u>40</u> Parcel <u>277</u> Grid _____		Applicant's Name & Mailing Address, (if other than stated herein): _____ _____	
Zoning _____ Map Coordinates _____ Lot Size <u>5.388 AC</u>		Phone _____ Fax _____	
Existing Use _____		Contractor Company <u>BACKYARD CREATIONS INC</u>	
Proposed Use <u>NEW SWIMMING POOL</u>		Contact Person <u>STEPHEN BRAUN</u>	
Estimated Construction Cost \$ <u>138,000</u>		Address <u>1560 TILCO DR SUITE A</u>	
Description of Work <u>Improve swimming pool</u>		City <u>FREDERICK</u> State <u>MD</u> Zip Code <u>21704</u>	
Occupant or Tenant _____		License No. <u>40140</u>	
Contact Name <u>Kenneth Glaeck</u>		Phone <u>301-668-7420</u> Fax <u>301-668-4418</u>	
Address <u>7122 Deer Valley Rd</u>		Engineer or Architect Company _____	
City <u>Highland</u> State <u>MD</u> Zip Code <u>20917</u>		Contact Person _____	
Phone <u>202-549-1215</u> Fax _____		Address _____	
City _____ State _____ Zip Code _____		City _____ State _____ Zip Code _____	
Phone _____ Fax _____		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: _____ Public _____ Private _____	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	Depth _____ Width _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	1 <sup>st</sup> floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>	2 <sup>nd</sup> floor: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	Basement: _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
		Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	
		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 _____	

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: Steve Braun Print Name: Stephen Braun

Email Address: Steveb@bjc.pools.com

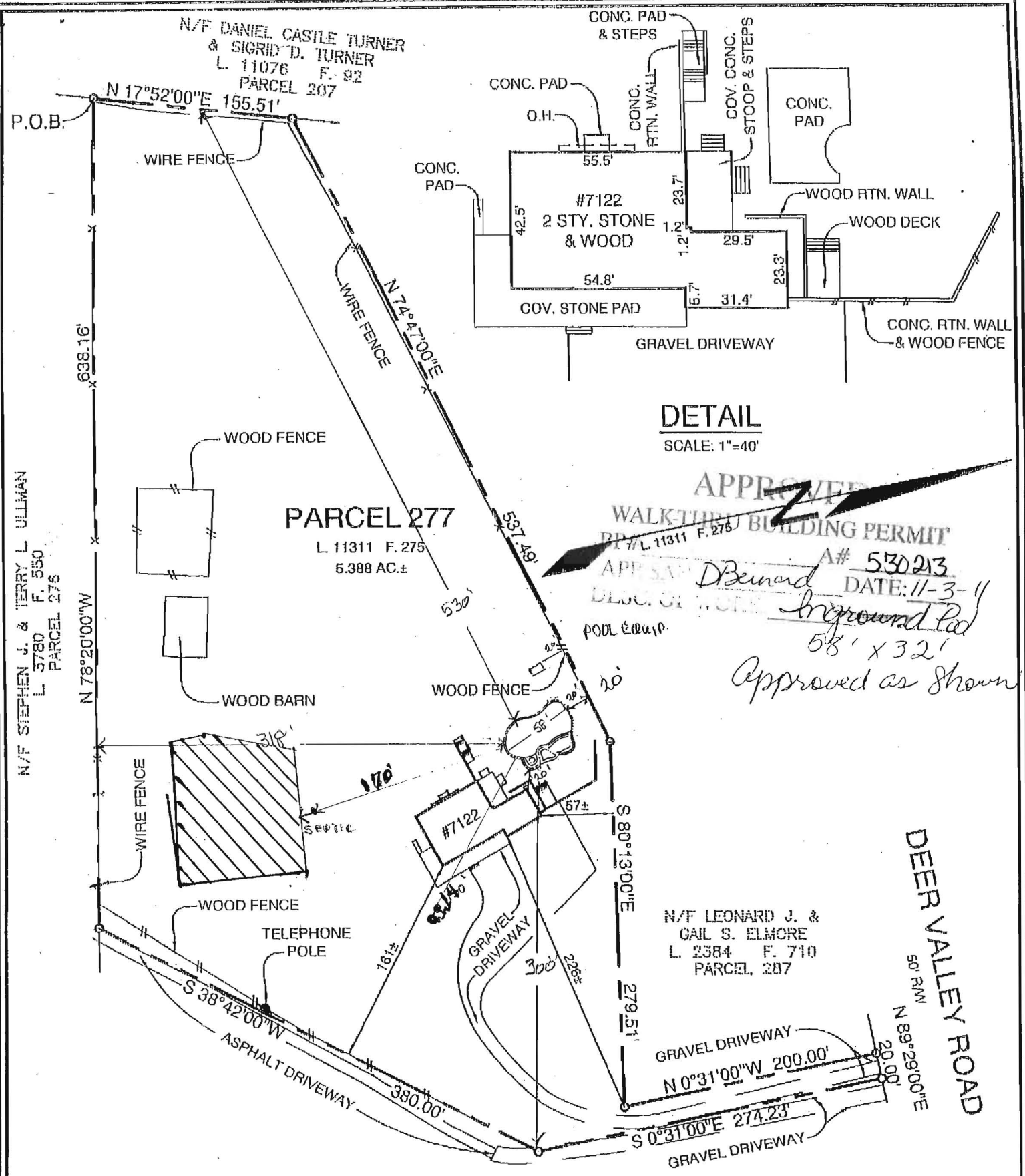
Title/Company: President, Backyard Creations Inc Date: 11/3/11

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID #
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Officials			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per fee \$ _____
Health		<u>D. Bernard 11-3-11</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?			YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
			Is Entrance Permit Required?	Check # _____
			YES <input type="checkbox"/> NO <input type="checkbox"/>	Validation # _____
			Historic District?	
			YES <input type="checkbox"/> NO <input type="checkbox"/>	
			Lot Coverage for New Town Zone	
			SDP/Red-line approval date _____	Accepted by _____

CONTINGENCY CONSTRUCTION START   
ONE STOP SHOP:

Distribution of Copies - White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA



- NOTES:
1. THIS PLAT IS A BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING PURPOSES. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE STRUCTURES. THIS PLAT DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR FOR SECURING FINANCING OR REFINANCING.
  2. THE +/- SETBACK ACCURACY IS 1 FOOT.
  3. THIS PLAN OR PLAT IS NOT INTENDED TO SHOW ALL MATTERS RELATED TO THE PROPERTY SHOWN HEREON.
  4. THE PROPERTY SHOWN HEREON IS A DEED PLOTTING ONLY AND DOES NOT FORM A MATHEMATICALLY CLOSED FIGURE.

**LOCATION DRAWING**  
7122 DEER VALLEY ROAD  
TAX MAP 40, PARCEL 277  
**L. 11311 F. 275**  
ELECTION DISTRICT NO. 5  
HOWARD COUNTY, MARYLAND

THIS LOT DOES NOT APPEAR TO LIE WITHIN THE 100 YEAR FLOOD PLAIN AS SHOWN ON THE F.E.M.A. FLOOD HAZARD MAP 240044-0037-B AS REVISED DECEMBER 4, 1986.

**CERTIFICATION**

I HEREBY CERTIFY THAT I WAS IN THE RESPONSIBLE CHARGE OVER THE PREPARATION OF THIS LOCATION DRAWING AND THE SURVEY WORK REFLECTED IN IT, IS IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN THE CODE OF MARYLAND TITLE 9, SUBTITLE 13, CHAPTER 06, REGULATION 422 AND THE POSITION OF EXISTING IMPROVEMENTS AS SHOWN HEREON, ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

MICHAEL D. ADCKOCK  
PROFESSIONAL LAND SURVEYOR  
NO. 21257, EXPIRATION DATE 10/31/15

**Sill · Adcock & Associates · LLC**  
Engineers · Surveyors · Planners  
3300 North Ridge Road, Suite 160  
Ellicott City, Maryland 21043  
Phone: 443.325.7682 Fax: 443.325.7685  
Email: mike@saaland.com

REFERENCE:	L. 11311 F. 275
DATE:	SEPTEMBER 12, 2011
SCALE:	1"=100'
FILE NO.:	11-059

**COMPLETE THIS FORM WHEN DROPPING OFF ANY  
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY  
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:**

Date: 10/21/11  
 To: PLANS REVIEW  
 (Person's Name and Division)  
 From: JIM BRUMSTED ALLAN HOMES UNLIMITED ) 410 977 5705  
 (Your Name, Company Name and Telephone Number)  
 Subject: Project name GLUECK RENOVATION  
 Project site address 7122 DEER VALLEY  
 Building permit # B11002918 SDP # N/A  
 Other information pertinent to this project \_\_\_\_\_

- Please check the attachments below that you are submitting with this transmittal:
- Letter of response to Howard County plan review code letter - HEALTH DEPT.
  - Revised plans and/or revised details: When submitting for a complete re-review, duplicate sets shall be submitted.
  - Structural steel certification
  - Energy conservation calculations
  - Certification for \_\_\_\_\_ (be specific).
  - Copies of \_\_\_\_\_ (be specific).
  - Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # \_\_\_\_\_
  - Other \_\_\_\_\_

*Copy received original on 10-24-11*  
*Revision OK*

Is there anyone else that should be contacted regarding this project if there are questions?

If so, please list that person's name and telephone number below:

JIM BRUMSTED (410) 977-5705  
 (Person's name) (Telephone number)

**PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.**

Received by *Salma Ahmed*

*cc: zoning  
DET  
Health*

white: Plan Review Division  
 yellow: Applicant  
 pink: Permit Division

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER  
D-0000000000

Building Address 7122 DEER VALLEY RD  
HIGHLAND, MD 20777  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_  
Section \_\_\_\_\_ Area 3,542 Lot \_\_\_\_\_  
Tax Map 40 Parcel 9 Grid 277  
Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name RYAN & SHARON  
Address 7051 DEER VALLEY RD  
City HIGHLAND State MD Zip Code 20777  
Phone 301-854-2301 Phone \_\_\_\_\_  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
301-854-1107 301-854-1072

Existing Use RESIDENCE  
Proposed Use RESIDENCE  
Estimated Construction Cost \$ \$110,000.00  
Description of Work ADD 2.5 SF TO EX - 14' x 14' NEW KITCHEN  
> 250 12' SF - WOODS DECK

Contractor Company LEHMAN ASSOC. P.C. ARCHAIC  
Contact Person JOHN LEHMAN, AIA  
Address 6883 MINK HOLLOW RD.  
City HIGHLAND State MD Zip Code 20777  
License No. \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

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

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

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>42'</u> <u>36'</u> 2nd floor: <u>28'</u> <u>65'</u> Basement: <u>33'</u> <u>65'</u> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u> 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 <input checked="" type="checkbox"/> Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/> Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____

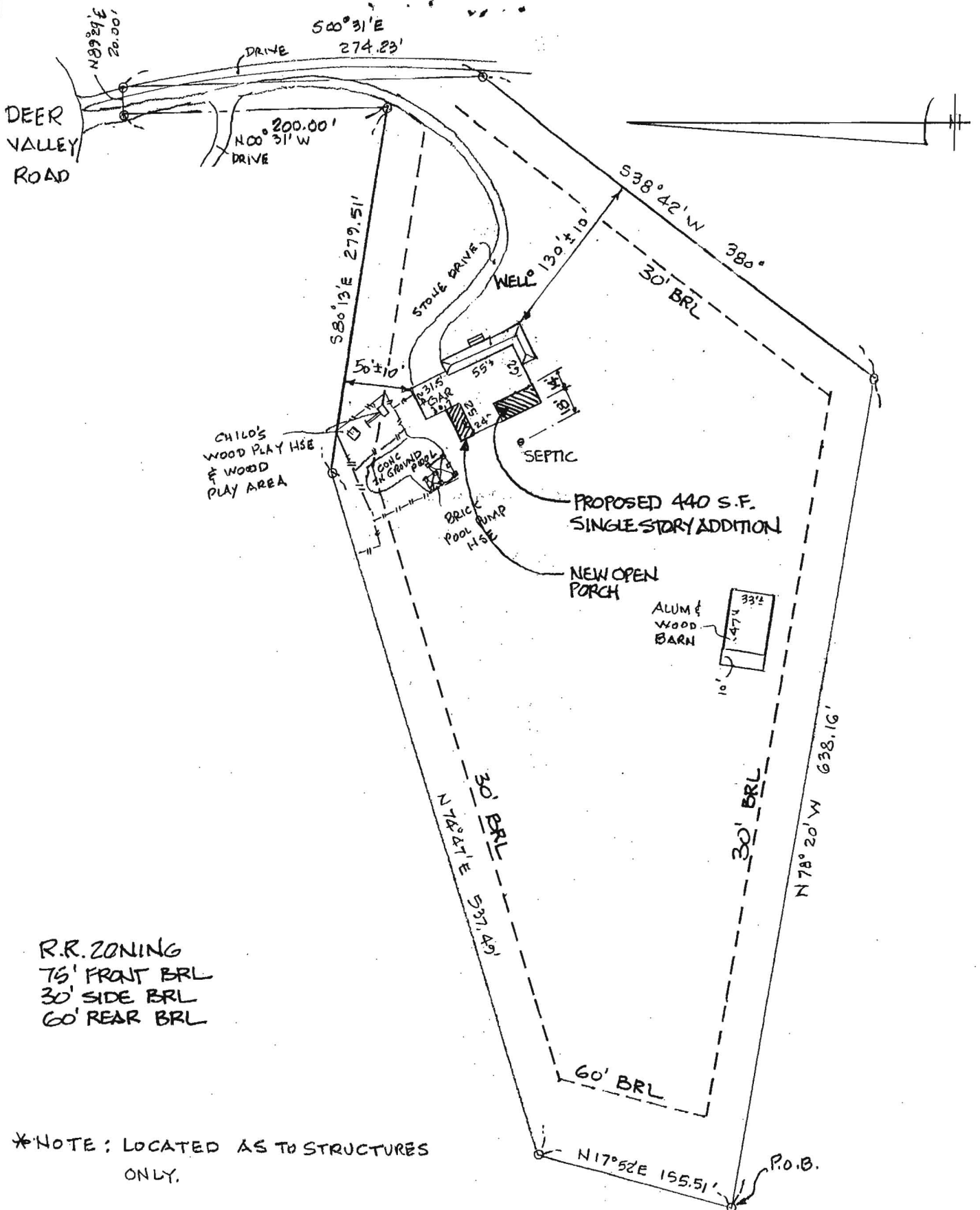
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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 \_\_\_\_\_  
Title Company \_\_\_\_\_

Print Name JOHN I. LEHMAN AIA  
Date 7-4-03

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			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health	<u>4-29-09</u>	<u>Dana Bernard</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 # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			Lot Coverage for NewTown Zone _____	Accepted by _____
T:\forms\PERMIT.FRM			SDP/Red-line approval date _____	



R.R. ZONING  
 75' FRONT BRL  
 30' SIDE BRL  
 60' REAR BRL

\*NOTE: LOCATED AS TO STRUCTURES ONLY.

This plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. The plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements. The drawing does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing.

The lot shown hereon is in flood zone C PER F.E.M.A.  
 Flood insurance rate map panel # 240044-0037B

Note: Flood zones are approximate as scaled from F.E.M.A. flood insurance rate map. Subject to any and all B.R.L.s or easements as shown or noted on record plats or deeds.

This drawing is not to be used to obtain permits.

# 7122 DEER VALLEY ROAD

TITLE DEED: 10644-1  
 HOWARD CO., MARYLAND

SCALE

1" = 100'

DATE

7-11-08

JOB #

08-542

PROPOSED EXPANSION TO THE RESIDENCE OF

MR. BYONG CHOI

7122 DEER VALLEY ROAD, HIGHLAND, MARYLAND 20777

6888 Mink Hollow Rd.  
 Highland, MD 20777  
 301.854.1109  
 301.854.1072  
 www.lapc.us



LEHMAN ASSOCIATES, PC  
a r c h i t e c t s

RECEIVED

DEC 9 2008

LICENSES & PERMITS  
DIVISION

December 8, 2008

Mr. Avis L. Corbin  
Chief, Licenses and Permits Division  
Department of Inspections, Licenses & Permits  
3430 Court House Drive  
Ellicott City, MD 21043

CK #	<u>3725</u>
CR #	<u>160479</u>
DATE #	<u>12/9/08</u>
F 50.00	

**RE: Building Permit Application #B08002646  
Proposed Additions and Renovations to:  
The Residence of Mr. Byong Choi  
7122 Deer Valley Road  
Highland, MD 20777**

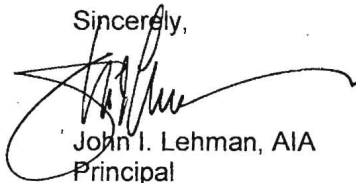
Dear Mr. Corbin;

We are resubmitting our newly revised permit drawings for the home expansion project noted above. This resubmittal is in part due to current Health Department comments regarding the close proximity of the existing septic system to the current residence. The review requires that we not only relocate but improve the existing system which in turn had my client re-evaluate and somewhat expand the scope of the proposed project. Specifically, we will be demolishing an adjacent and poorly constructed 14' x 24' single story addition and rebuilding on the same footprint with a full basement in lieu of the current crawl space. The proposed expansion from the previously submitted permit documents is mostly unchanged and includes the 440 sq. ft. of enclosed single story addition and the new 288 sq. ft. covered porch.

As required, we are attaching (2) full sets of the permit/construction documents and (4) additional 8 1/2" x 14" copies of an updated site plan for your review. Copies of the full percolation test civil plan have been submitted directly to the Health Department by the engineering firm of O'Connell & Lawrence, Inc.

If you have any questions, please direct them to me at 301-854-1109 or via email at [jlehman@lapc.us](mailto:jlehman@lapc.us).

Sincerely,

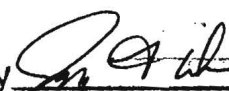
  
John I. Lehman, AIA  
Principal

CC: zoning  
health

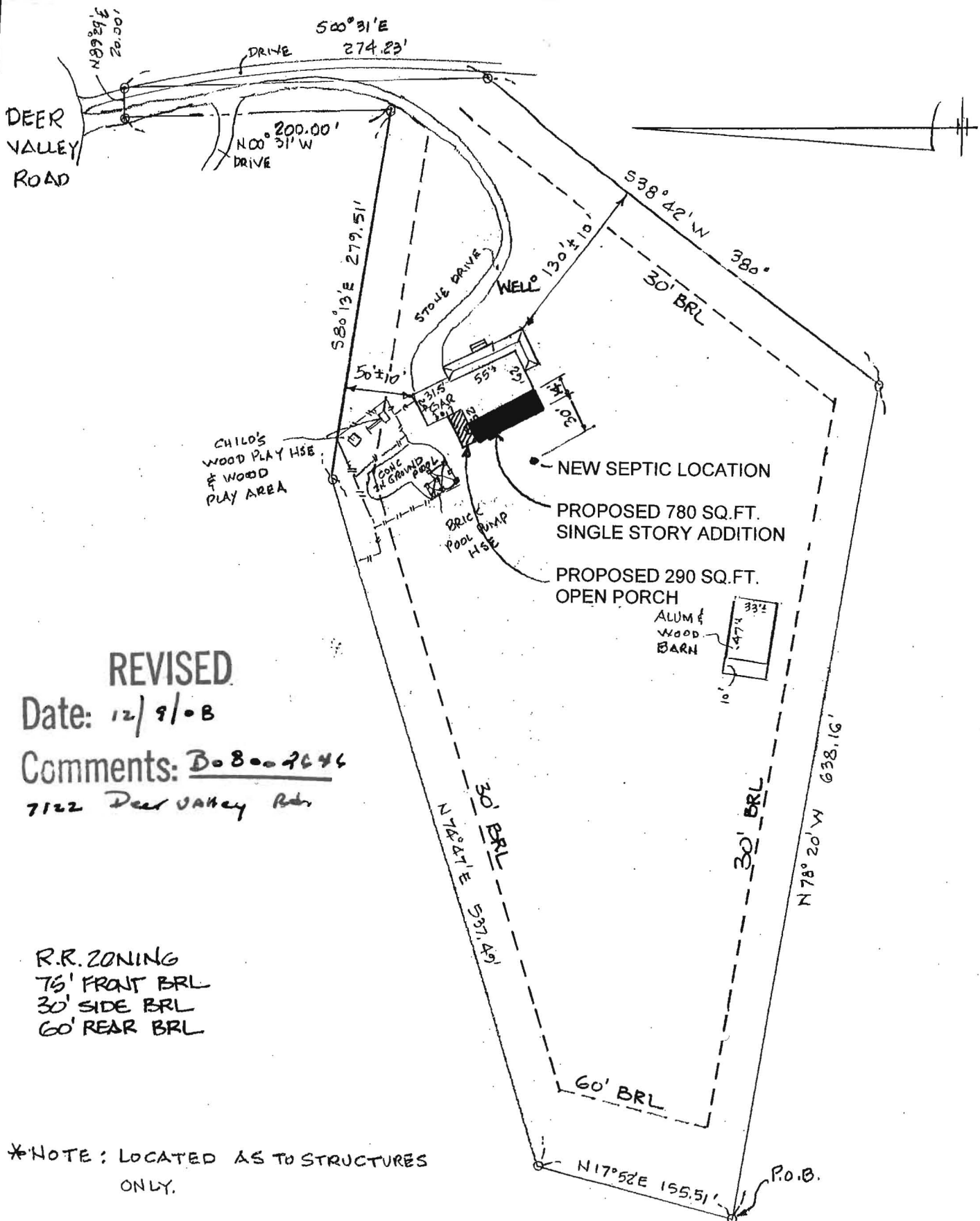
6888 Mink Hollow Road  
Highland, MD 20777-9766

301.854.1109 t

301.854.1072 f

Scanned by  Date 12/10/08

[www.lapc.us](http://www.lapc.us)



REVISED

Date: 12/9/08

Comments: D-800-2646

7122 Deer Valley Rd

R.R. ZONING  
75' FRONT BRL  
30' SIDE BRL  
60' REAR BRL

\*NOTE: LOCATED AS TO STRUCTURES ONLY.

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The lot shown hereon is in flood zone C PER F.E.M.A.  
Flood insurance rate map panel # 240044-0037B

Note: Flood zones are approximate as scaled from F.E.M.A. flood insurance rate map. Subject to any and all B.R.L.s or easements as shown or noted on record plats or deeds.

This drawing is not to be used to obtain permits.

# 7122 DEER VALLEY ROAD

TITLE DEED: 10644-1  
HOWARD CO., MARYLAND

SCALE

1" = 100'

DATE

12-4-08

JOB #

08-542

PROPOSED EXPANSION TO THE RESIDENCE OF

MR. BYONG CHOI

7122 DEER VALLEY ROAD, HIGHLAND, MARYLAND 20777



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

Permit Number:

Building Address: 7122 Deer Valley Road  
Highland, Md 20177

Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_

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

Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_

Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_

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

Existing Use: SFD

Proposed Use: SFD Covered Pavilion

Estimated Construction Cost: \$ 10,000

Description of Work: 20' x 24' Covered Pavilion  
on grade

Occupant or Tenant: Same as Owner

Was tenant space previously occupied?  Yes  No

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Property Owner's Name: Ken Glueck

Address: 7122 Deer Valley Rd

City: Highland State: Md Zip Code: 20177

Home Phone: \_\_\_\_\_ Work Phone: 202-549-1215

Applicant's Name & Mailing Address, (If other than stated herein): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Contractor Company: Woodworking by Dave, Inc.

Contact Person: David Gooding

Address: 6030 Daybreak Circle

City: Clarksville State: Md Zip Code: 21029

License No.: 87703

Phone: 413-535-6487 Fax: \_\_\_\_\_

Email: Dave3838@comcast.net

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 type="checkbox"/> Partial
	<input type="checkbox"/> Other Suppression
	No. of Heads:

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 <sup>st</sup> floor:	<input checked="" type="checkbox"/> Private
2 <sup>nd</sup> floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input checked="" type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings: <u>Pest &amp; Pile</u>	
Roof: <u>Asph/Flt</u>	
<input type="checkbox"/> State Certified Modular	
<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.

David Gooding  
 Applicant's Signature

Dave3838@comcast.net  
 Email Address

Contractor  
 Title/Company

David Gooding  
 Print Name

3-21-12  
 Date

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
 -FOR OFFICE USE ONLY-

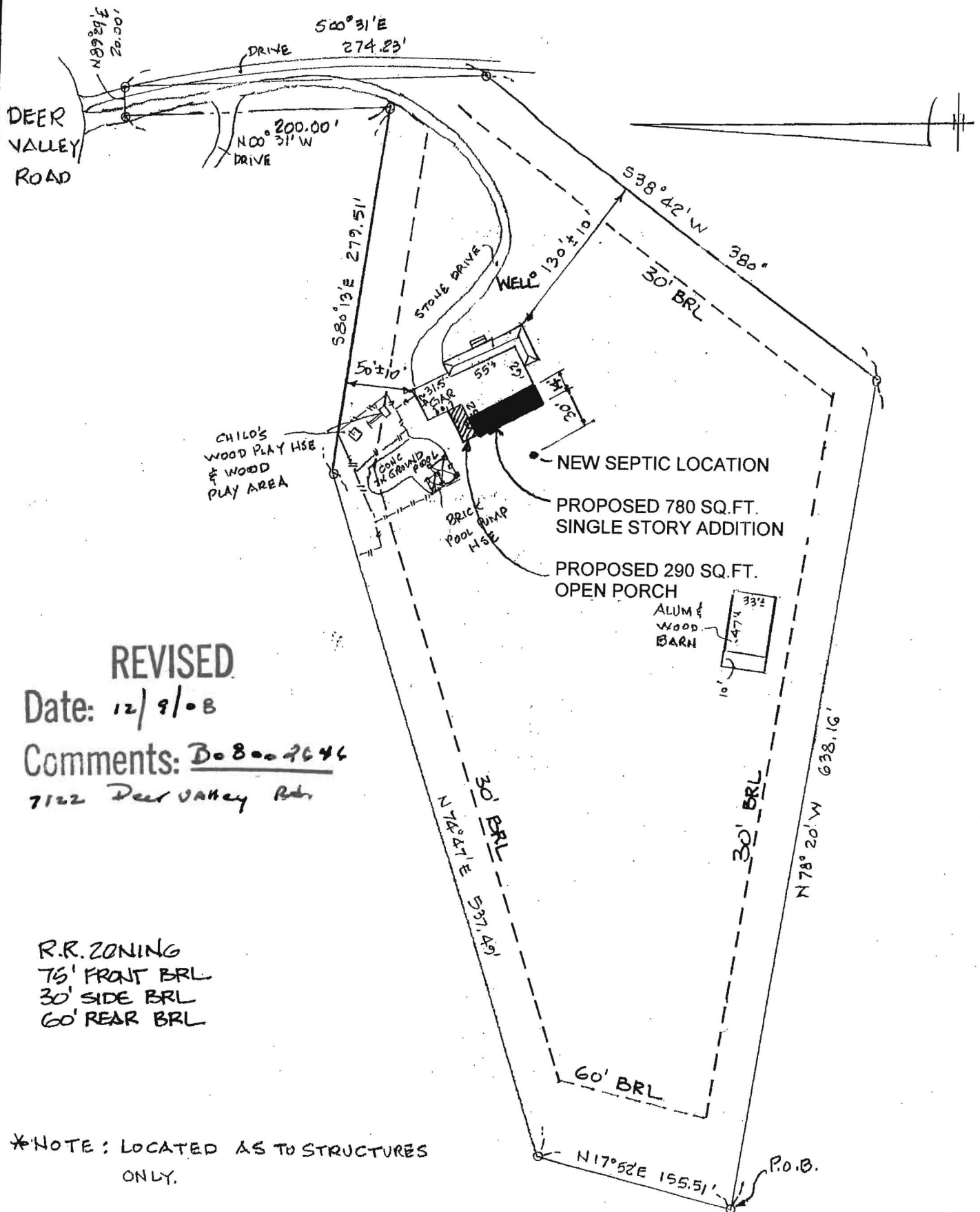
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA ( Zoning )		
PSZA ( Engineering )		
Health	<u>3/20/12</u>	<u>Roberta</u>
Fire Protection		

Is Sediment Control approval required for issuance?  Yes  No  
 CONTINGENCY CONSTRUCTION START  
 ONE STOP SHOP

**DPZ SETBACK INFORMATION**

Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> 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	\$



REVISED

Date: 12/9/08

Comments: B08002646

7122 Deer Valley Rd.

R.R. ZONING  
 75' FRONT BRL  
 30' SIDE BRL  
 60' REAR BRL

\*NOTE: LOCATED AS TO STRUCTURES ONLY.

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The lot shown hereon is in flood zone C PER F.E.M.A.  
 Flood insurance rate map panel # 240044-0037B

Note: Flood zones are approximate as scaled from F.E.M.A. flood insurance rate map. Subject to any and all B.R.L.s or easements as shown or noted on record plats or deeds.

This drawing is not to be used to obtain permits.

# 7122 DEER VALLEY ROAD

TITLE DEED: 10644-1  
 HOWARD CO., MARYLAND

SCALE

1" = 100'

DATE

12-4-08

JOB #

08-542

PROPOSED EXPANSION TO THE RESIDENCE OF

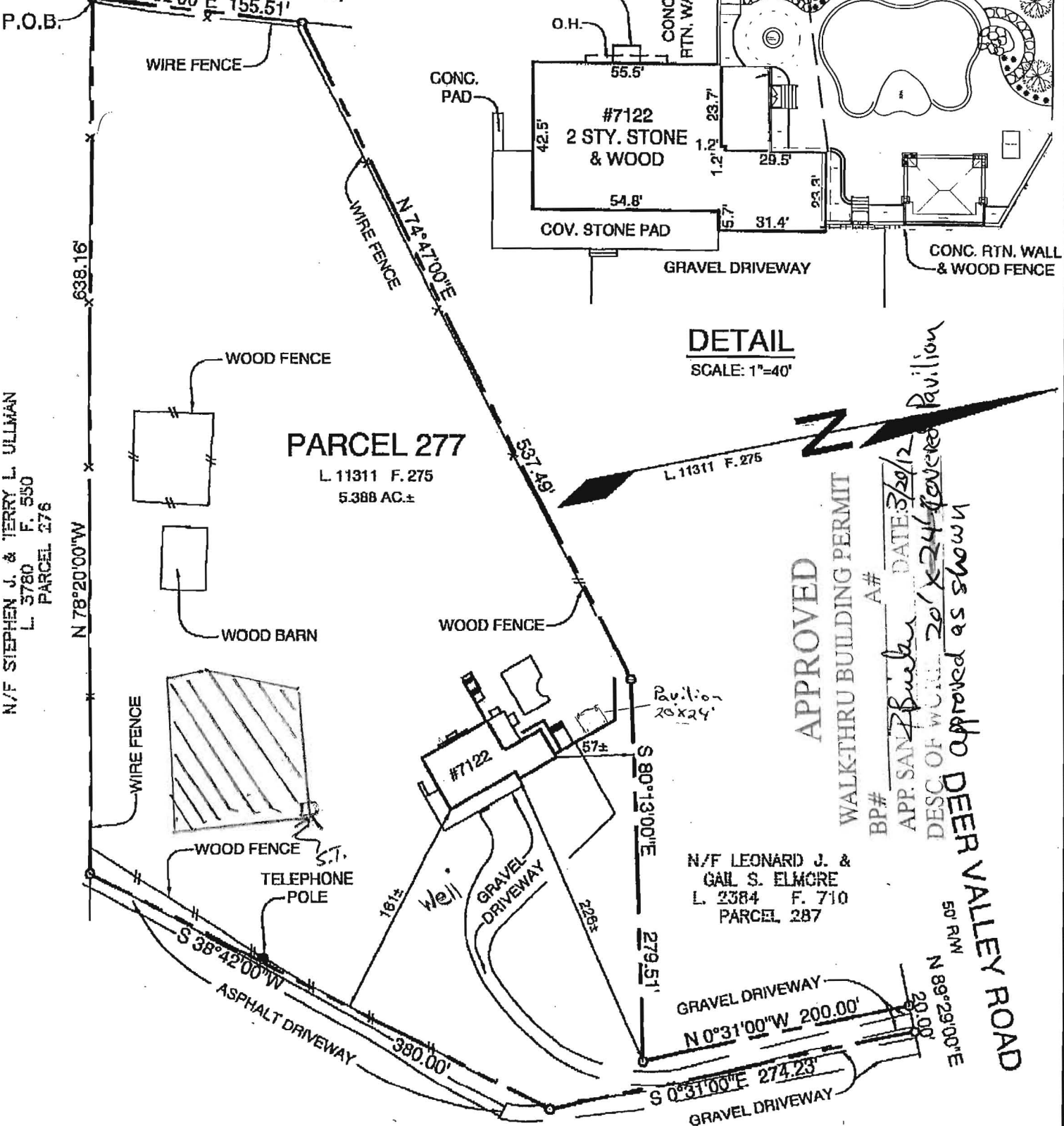
MR. BYONG CHOI

7122 DEER VALLEY ROAD, HIGHLAND, MARYLAND 20777

6888 Mink Hollow Rd.  
 Highland, MD 20777  
 301.854.1109  
 301.854.1072  
 www.lapc.us

LEHMAN ASSOCIATES, PC  
 architects

N/F DANIEL CASTLE TURNER  
& SIGRID D. TURNER  
L. 11076 F. 92  
PARCEL 207



N/F STEPHEN J. & TERRY L. ULLMAN  
L. 3780 F. 550  
PARCEL 276

**DETAIL**  
SCALE: 1"=40'

**APPROVED**  
WALKTHRU BUILDING PERMIT

A# \_\_\_\_\_  
DATE 3/20/12  
DESC. OF WORK 20' x 24' Covered Pavilion

N/F LEONARD J. & GAIL S. ELMORE  
L. 2384 F. 710  
PARCEL 287

DEER VALLEY ROAD  
50' R/W  
N 89°29'00"E 20.00'

- NOTES:
1. THIS PLAT IS A BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING PURPOSES. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE STRUCTURES. THIS PLAT DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR FOR SECURING FINANCING OR REFINANCING.
  2. THE ± SETBACK ACCURACY IS 1 FOOT.
  3. THIS PLAN OR PLAT IS NOT INTENDED TO SHOW ALL MATTERS RELATED TO THE PROPERTY SHOWN HEREON.
  4. THE PROPERTY SHOWN HEREON IS A DEED PLOTTING ONLY AND DOES NOT FORM A MATHEMATICALLY CLOSED FIGURE.

**LOCATION DRAWING**  
7122 DEER VALLEY ROAD  
TAX MAP 40, PARCEL 277  
**L. 11311 F. 275**  
ELECTION DISTRICT NO. 5  
HOWARD COUNTY, MARYLAND

THIS LOT DOES NOT APPEAR TO LIE WITHIN THE 100 YEAR FLOOD PLAIN AS SHOWN ON THE F.E.M.A. FLOOD HAZARD MAP 240044-0037-B AS REVISED DECEMBER 4, 1986.

**CERTIFICATION**

I HEREBY CERTIFY THAT I AM THE RESPONSIBLE CHARGE OVER THE PREPARATION OF THIS LOCATION DRAWING AND THE SURVEY WORK REFLECTED IN IT, IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN THE CODE OF MARYLAND TITLE 9, SUBTITLE 13, CHAPTER 06, REGULATION 42 AND THE POSITION OF EXISTING IMPROVEMENTS AS SHOWN HEREON, ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

MICHAEL D. ALBANDER  
PROFESSIONAL SURVEYOR  
NO. 21257, EXPIRATION DATE 10/31/12

**Sill · Adcock & Associates · LLC**  
Engineers · Surveyors · Planners  
3300 North Ridge Road, Suite 160  
Ellicott City, Maryland 21043  
Phone: 443.325.7682 Fax: 443.325.7685  
Email: mike@snaland.com

REFERENCE:	L. 11311 F. 275
DATE:	SEPTEMBER 12, 2011
SCALE:	1"=100'
FILE NO.:	11-059

Building Address: 7122 Deer Valley Rd  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Tax Map: \_\_\_\_\_ Parcel: 277 Grid: 0009  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: \_\_\_\_\_  
 Proposed Use: \_\_\_\_\_  
 Estimated Construction Cost: \$ \_\_\_\_\_  
 Description of Work: Pole building (36' x 68' x 10' w/ 12' x 18' side porch) for horses and farm equipment  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_  
 Address: 7122 \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Applicant's Name & Mailing Address, (If other than stated herein): \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Company: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

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"/> <u>Roadside Tree Project Permit</u>	<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 type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 <sup>st</sup> floor:	<input type="checkbox"/> Private
2 <sup>nd</sup> floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input 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"/> <u>Roadside Tree Project Permit</u>
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 \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Title/Company \_\_\_\_\_

Print Name \_\_\_\_\_  
 Date 10/31/2011

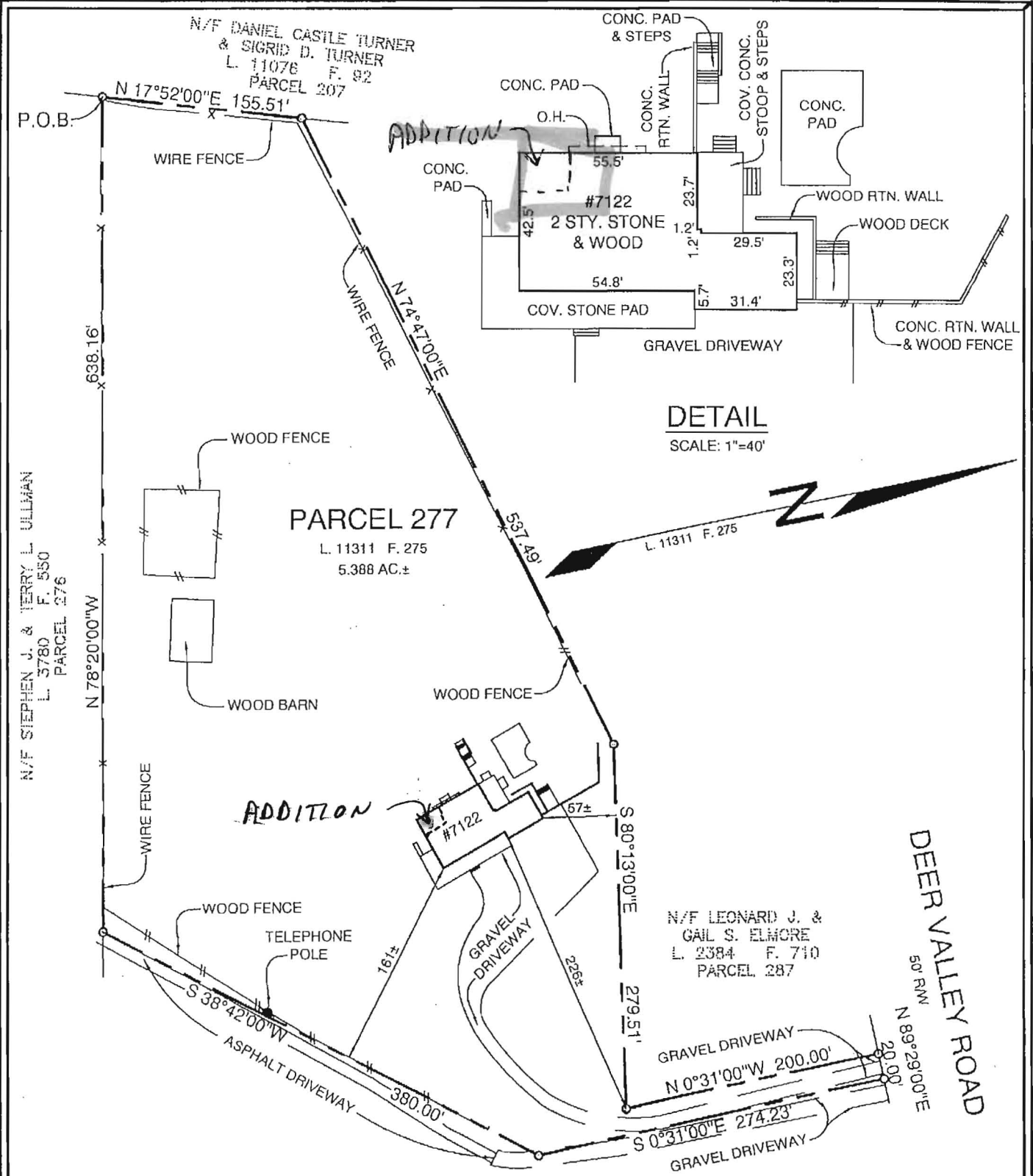
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA ( Zoning )		
PSZA ( Engineering )		
Health	<u>11-9-11</u>	<u>Will Scott</u>
Fire Protection		

Is Sediment Control approval required for issuance?  Yes  No  
 CONTINGENCY CONSTRUCTION START  
 ONE STOP SHOP

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> 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	\$



**DETAIL**  
SCALE: 1"=40'

LOCATION DRAWING  
7122 DEER VALLEY ROAD  
TAX MAP 40, PARCEL 277  
**L. 11311 F. 275**  
ELECTION DISTRICT NO. 5  
HOWARD COUNTY, MARYLAND

- NOTES:
1. THIS PLAT IS A BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING PURPOSES. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE STRUCTURES. THIS PLAT DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR FOR SECURING FINANCING OR REFINANCING.
  2. THE +/- SETBACK ACCURACY IS 1 FOOT.
  3. THIS PLAN OR PLAT IS NOT INTENDED TO SHOW ALL MATTERS RELATED TO THE PROPERTY SHOWN HEREON.
  4. THE PROPERTY SHOWN HEREON IS A DEED PLOTTING ONLY AND DOES NOT FORM A MATHEMATICALLY CLOSED FIGURE.

THIS LOT DOES NOT APPEAR TO LIE WITHIN THE 100 YEAR FLOOD PLAIN AS SHOWN ON THE F.E.M.A. FLOOD HAZARD MAP 240044-0037-B AS REVISED DECEMBER 4, 1986.

**CERTIFICATION**

I HEREBY CERTIFY THAT I WAS IN RESPONSIBLE CHARGE OVER THE PREPARATION OF THIS LOCATION DRAWING AND THE SURVEY WORK REFLECTED HEREIN IS IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN THE CODE OF MARYLAND TITLE 9, SUBTITLE 14, CHAPTER 06, REGULATION 06-22 AND THE POSITION OF EXISTING IMPROVEMENTS AS SHOWN HEREON, ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

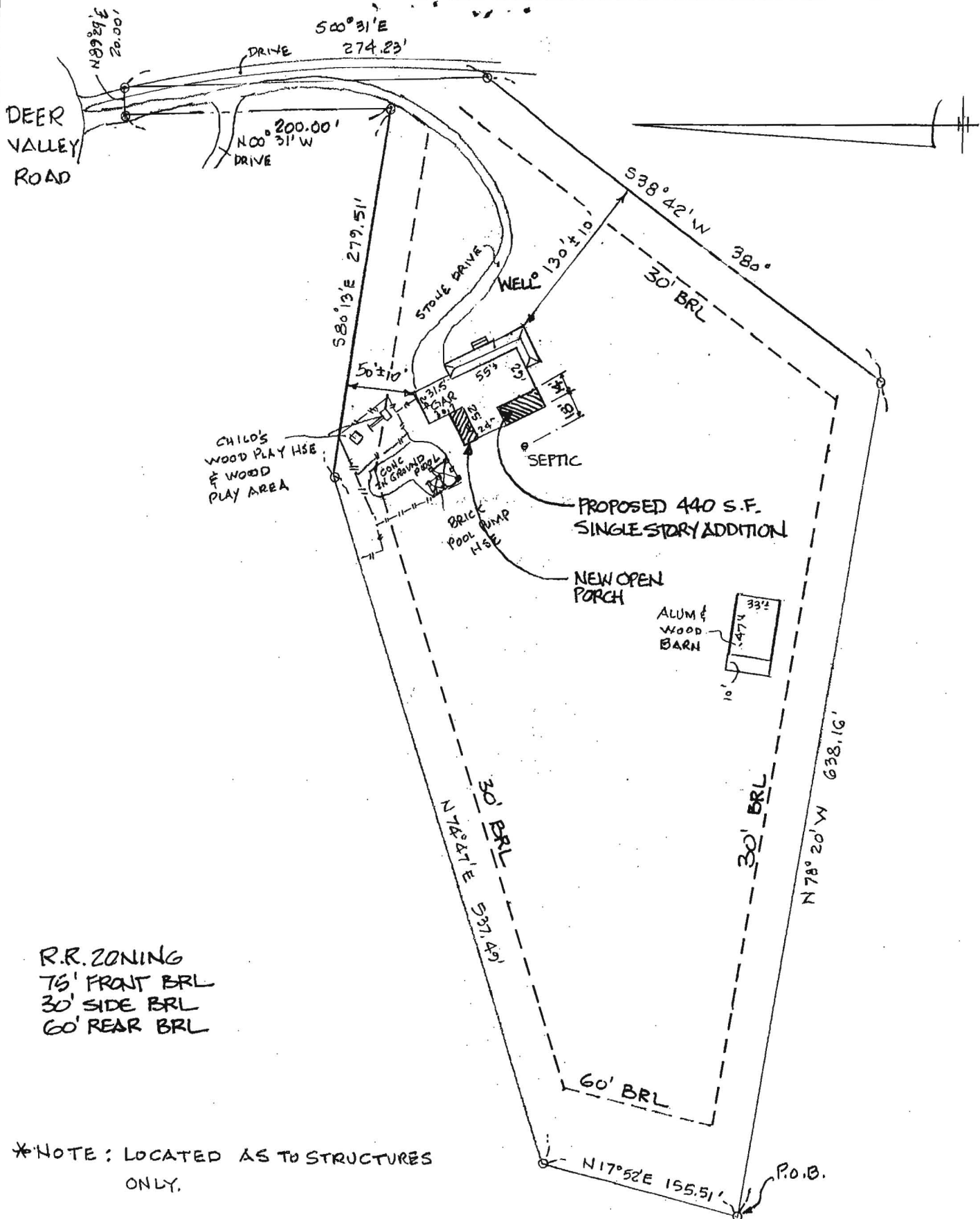
MICHAEL D. ADCKOCK  
PROFESSIONAL LAND SURVEYOR  
NO. 21257, EXPIRATION DATE 10/31/2017

**Sill · Adcock & Associates · LLC**  
Engineers · Surveyors · Planners

3300 North Ridge Road, Suite 160  
Ellicott City, Maryland 21043  
Phone: 443.325.7682 Fax: 443.325.7685  
Email: mike@saaland.com

REFERENCE:	L. 11311 F. 275
DATE:	SEPTEMBER 12, 2011
SCALE:	1"=100'
FILE NO.:	11-059





R.R. ZONING  
 75' FRONT BRL  
 30' SIDE BRL  
 60' REAR BRL

\*NOTE: LOCATED AS TO STRUCTURES ONLY.

# 7122 DEER VALLEY ROAD

TITLE DEED: 10644-1  
 HOWARD CO., MARYLAND

This plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. The plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements. The drawing does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing.

The lot shown hereon is in flood zone C PER F.E.M.A.  
 Flood insurance rate map panel # 240044-0037D

Note: Flood zones are approximate as scaled from F.E.M.A. flood insurance rate map. Subject to any and all B.R.L.s or easements as shown or noted on record plats or deeds.

This drawing is not to be used to obtain permits.

SCALE

1" = 100'

DATE

7-11-08

JOB #

08-542

PROPOSED EXPANSION TO THE RESIDENCE OF

MR. BYONG CHOI

7122 DEER VALLEY ROAD, HIGHLAND, MARYLAND 20777

6888 Mink Hollow Rd.  
 Highland, MD 20777  
 301.854.1109  
 301.854.1072  
 www.lapc.us

LEHMAN ASSOCIATES, PC  
 architects

Building Address 7122 DEER VALLEY RD  
HIGHLAND, MD 20777

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

Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_

Section \_\_\_\_\_ Area 3,542 Lot \_\_\_\_\_

Tax Map 40 Parcel 9 Grid 277

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name FRANK SHUI

Address 7051 DEER VALLEY RD

City HIGHLAND State MD Zip Code 20777

Phone 301-854-2301 Phone \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use RESIDENCE

Proposed Use RESIDENCE

Estimated Construction Cost \$ \$1,100,000

Description of Work NEW KITCHEN  
12' SF ADDED PORCH

> 250

Contractor Company LEHMAN ASSOC. P.C. ARCHITECTS

Contact Person JOHN LEHMAN, AIA

Address 6883 MINK HOLLOW RD.

City HIGHLAND State MD Zip Code 20777

License No. \_\_\_\_\_

Phone 301-854-1114 Fax \_\_\_\_\_

Occupant or Tenant \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company SEE ABOVE

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

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

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: <u>80' x 42'</u> <u>36'</u> 2nd floor: <u>28'</u> <u>65'</u> Basement: <u>28'</u> <u>65'</u>	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
No. of Bedrooms <u>4</u>	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:
Height: <u>35'</u>	
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: _____	
<input type="checkbox"/> State Certified Modular	
<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 JOHN I. LEHMAN AIA

Title/Company \_\_\_\_\_

Print Name JOHN I. LEHMAN AIA

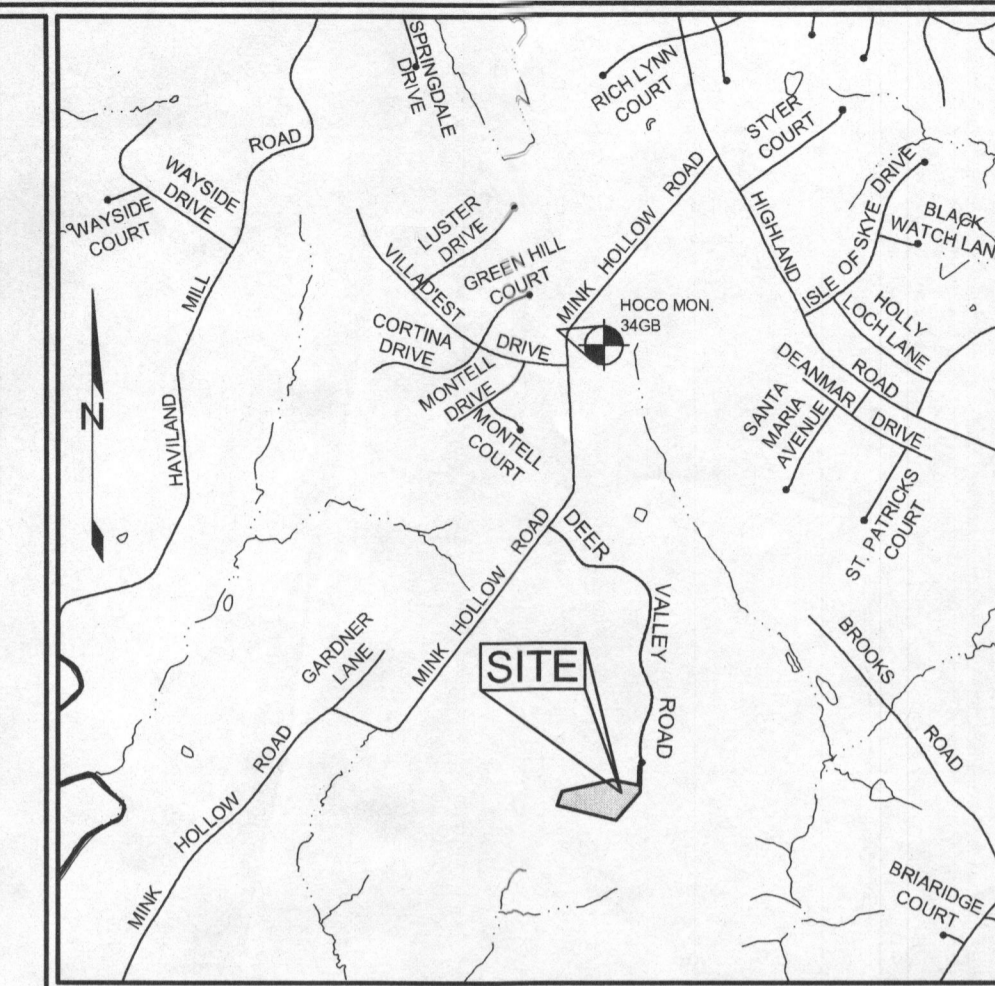
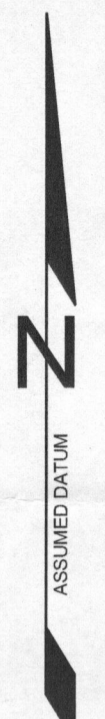
Date 7-4-08

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			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health	<u>4-29-09</u>	<u>Dana Bernard</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 NewTown Zone _____	
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Accepted by _____
Distribution of Copies- White: Building Official				
Green: LDD, DPZ				
Yellow: DED, DPZ				
Pink: Health				
Gold: SHA				

**LEGEND**

- BOUNDARY
- ADJOINING BOUNDARY
- EXISTING CONTOUR
- WOOD/VINYL FENCE
- CHAIN LINK FENCE
- GRAVEL DRIVEWAY
- EXISTING TREELINE
- EXISTING SPOT ELEVATION
- UTILITY POLE
- SANITARY CLEANOUT
- LIGHT POLE
- SEPTIC TANK
- WELL
- TREE
- BUSH



**VICINITY MAP**  
SCALE: 1"=200'

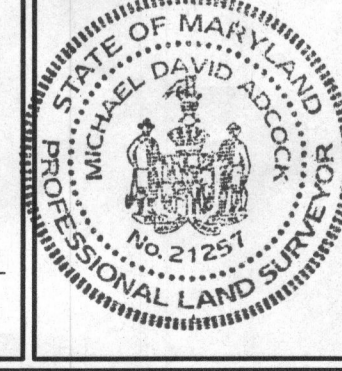


**GENERAL NOTES**

1. SUBJECT PROPERTY IS ZONED RR-DEO PER THE 20204 COMPREHENSIVE ZONING PLAN AND THE 'COMP. LITE' ZONING AMENDMENTS EFFECTIVE 7/28/06.
2. THE ± SETBACK ACCURACY IS 1 FOOT.
3. THIS SURVEY WAS PERFORMED WITHOUT THE BENEFIT OF A TITLE REPORT AND IS NOT INTENDED TO SHOW ALL MATTERS RELATED TO THE PROPERTY SHOWN HEREON.
4. TOPOGRAPHY OUTSIDE THE BOUNDS OF THE PROJECT AND ADJACENT PROPERTY DETAILS ARE BASED ON HOWARD COUNTY AERIAL TOPOGRAPHY.
5. BUILDING RESTRICTION LINES SHOWN ARE FROM EXISTING HOWARD COUNTY ZONING REGULATIONS.
6. ELEVATIONS WERE DETERMINED BY HOWARD COUNTY GEODETIC CONTROL STATION NO. 34GB.
  - ⊙ DENOTES APPROXIMATE CONTROL STATION LOCATION (SEE VICINITY MAP).
  - STATION 34GB ELEV. = 555.88

**TOPOGRAPHIC SURVEY  
GLUECK PROPERTY**

TAX MAP 40 GRID 9 PARCEL 277  
5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND



**Sill · Adcock & Associates · LLC**  
Engineers · Surveyors · Planners  
3300 North Ridge Road, Suite 160  
Ellicott City, Maryland 21043  
Phone: 443.325.7682 Fax: 443.325.7685  
Email: info@saaland.com

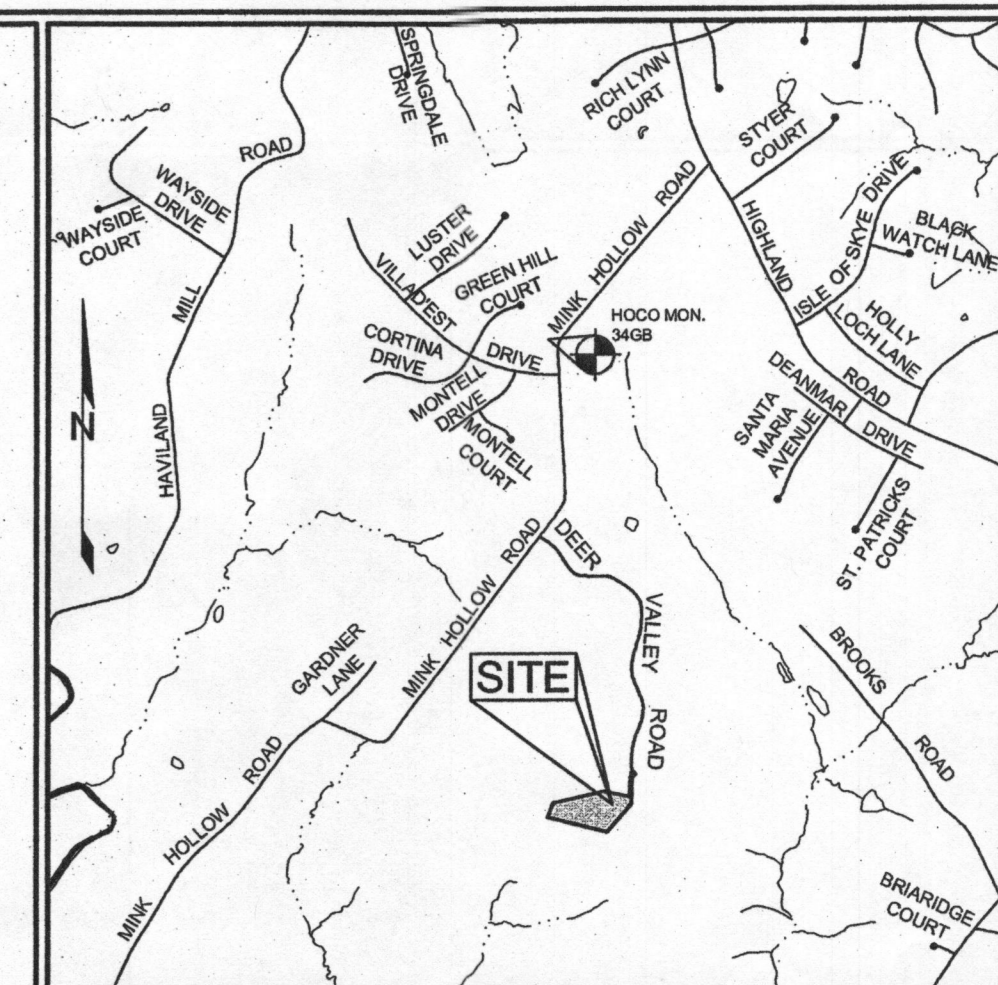
REF. NO.: L 11311 F. 275  
DRAWN BY: AEM  
CHECKED BY: MDA  
SCALE: 1"=40'  
DATE: SEPTEMBER 29, 2011  
PROJECT #: 11-059  
SHEET #: 1 of 1

**CERTIFICATION**  
I HEREBY CERTIFY THAT I WAS IN RESPONSIBLE CHARGE OVER THE PREPARATION OF THIS DRAWING AND THE SURVEY WORK REFLECTED IN IT, AND IS IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN THE CODE OF MARYLAND TITLE 9, SUBTITLE 11, CHAPTER 06, REGULATION 12.  
*Michael D. Adcock*  
MICHAEL D. ADCOCK  
PROFESSIONAL LAND SURVEYOR  
NO. 21257, EXPIRATION DATE: 06-16-2013

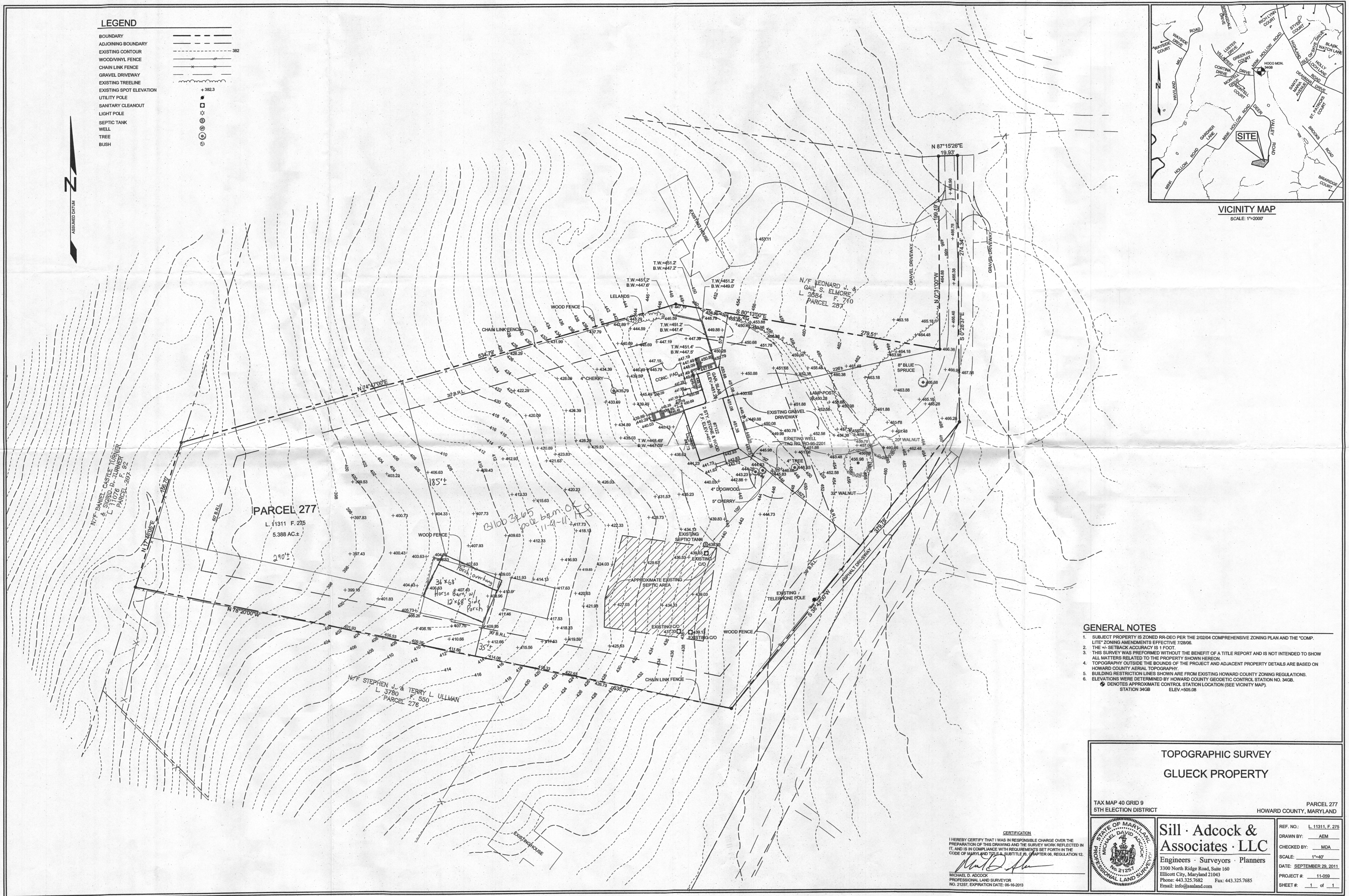
**LEGEND**

- BOUNDARY
- ADJOINING BOUNDARY
- EXISTING CONTOUR
- WOOD/VINYL FENCE
- CHAIN LINK FENCE
- GRAVEL DRIVEWAY
- EXISTING TREELINE
- EXISTING SPOT ELEVATION +382.3
- UTILITY POLE
- SANITARY CLEANOUT
- LIGHT POLE
- SEPTIC TANK
- WELL
- TREE
- BUSH

ASSUMED DATUM



**VICINITY MAP**  
SCALE: 1"=200'



- GENERAL NOTES**
1. SUBJECT PROPERTY IS ZONED RR-DEO PER THE 2/02/04 COMPREHENSIVE ZONING PLAN AND THE "COMP. LITE" ZONING AMENDMENTS EFFECTIVE 7/2006.
  2. THE +/- SETBACK ACCURACY IS 1 FOOT.
  3. THIS SURVEY WAS PERFORMED WITHOUT THE BENEFIT OF A TITLE REPORT AND IS NOT INTENDED TO SHOW ALL MATTERS RELATED TO THE PROPERTY SHOWN HEREON.
  4. TOPOGRAPHY OUTSIDE THE BOUNDS OF THE PROJECT AND ADJACENT PROPERTY DETAILS ARE BASED ON HOWARD COUNTY AERIAL TOPOGRAPHY.
  5. BUILDING RESTRICTION LINES SHOWN ARE FROM EXISTING HOWARD COUNTY ZONING REGULATIONS.
  6. ELEVATIONS WERE DETERMINED BY HOWARD COUNTY GEODETIC CONTROL STATION NO. 34GB.
- ⊕ DENOTES APPROXIMATE CONTROL STATION LOCATION (SEE VICINITY MAP).  
STATION 34GB ELEV.=505.08

**TOPOGRAPHIC SURVEY**  
**GLUECK PROPERTY**

TAX MAP 40 GRID 9  
5TH ELECTION DISTRICT

PARCEL 277  
HOWARD COUNTY, MARYLAND

1. I HEREBY CERTIFY THAT I WAS IN RESPONSIBLE CHARGE OVER THE PREPARATION OF THIS DRAWING AND THE SURVEY WORK REFLECTED IN IT, AND IS IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN THE CODE OF MARYLAND TITLE & SUBTITLE 16, CHAPTER 06, REGULATION 12.

*Michael D. Adcock*  
MICHAEL D. ADCOCK  
PROFESSIONAL LAND SURVEYOR  
NO. 21257, EXPIRATION DATE: 06-16-2013

**Sill · Adcock & Associates · LLC**  
Engineers · Surveyors · Planners  
3300 North Ridge Road, Suite 160  
Ellicott City, Maryland 21043  
Phone: 443.325.7682 Fax: 443.325.7685  
Email: info@sasland.com

REF. NO.: L 11311, F. 275  
DRAWN BY: AEM  
CHECKED BY: MDA  
SCALE: 1"=40'  
DATE: SEPTEMBER 29, 2011  
PROJECT #: 11-059  
SHEET #: 1 of 1