

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:

312000974

Building Address: 3136 Emerald Valley Rd

Suite/Apt. # _____ SDP/WP/BA #: _____

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: _____

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

~~_____~~ **SFD**

~~_____~~ **SFD with shed**

~~_____~~ Cost: \$ **11,300.00**

~~_____~~ **14 x 28 STORAGE SHED**

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: DANA MORGAN

Address: 3136 EMERALD VALLEY RD

City: ELlicott City State: MD Zip Code: 21042

Home Phone: 410531-6145 Work Phone: 410-345-2716

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

Phone: _____ Fax: _____

Email: MORGAN3136@VERIZON.NET

Contractor Company: HORIZON STRUCTURES

Contact Person: SENIER CAMMAUF

Address: 5075 LOWER VALLEY RD

City: ATGLEN State: PA Zip Code: 19310

License No.: 6S-07F-0630W

Phone: 888-447-4337 Fax: 610-593-7701

Email: SENIER@HORIZONSTRUCTURES.COM

Engineer/Architect Company: SAME AS ABOVE

Responsible Design Prof.: Shed PreBuilt

Address: 074x45

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

HIA#
PA055761

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
Area of construction (sq. ft.):	<u>Sewage Disposal</u>
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Construction type:	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<input type="checkbox"/> Roadside Tree Project Permit #	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL SHED	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
Depth	<input type="checkbox"/> Public
Width	<input type="checkbox"/> Private
1 st floor: <u>8 FT</u>	<input checked="" type="checkbox"/> Private
2 nd floor: <u>N/A</u>	<u>Sewage Disposal</u>
Basement: <u>N/A</u>	<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: <u>0</u>	<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"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<input checked="" type="checkbox"/> Roadside Tree Project Permit #
<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.

Dana P. Morgan Applicant's Signature DANA P. MORGAN Print Name

MORGAN3136@VERIZON.NET Email Address 3/21/2012 Date

Resident/Homestead Title/Company

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>4/30/12</u>	<u>[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/Rud-line approval date:	

Filing Fee	\$
Permit Fee	\$ <u>50</u>
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$

ENG 3237



7178 Columbia Gateway Drive, Columbia MD 21046
Phone (410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
Website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

DATE: April 17, 2012

RE: **Building Permit # B12000974**
3136 Emerald Valley Road
Building Site Plan

TO: Mr. Dan Morgan
Via E-mail: morgan3136@verizon.net
3136 Emerald Valley Road
Ellicott City, Maryland 21042

Prior to building permit approval, an approved building plan is required. Further review is contingent upon submission of a Building Plan showing the following:

- Septic easement and components should be defined on building plan.
- Well should be shown on plan.

Because you are only requesting the placement of a small pre-constructed shed on your property, I am recommending that you apply for a variance to request a waiver for the percolation certification plan and percolation testing. If you need any additional guidance please don't hesitate to give me call.

Your building permit will be placed "on hold" until all Health Dept. requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,

Dana Bernard

Dana Bernard, REHS/RS

Bureau of Environmental Health

Well and Septic Program

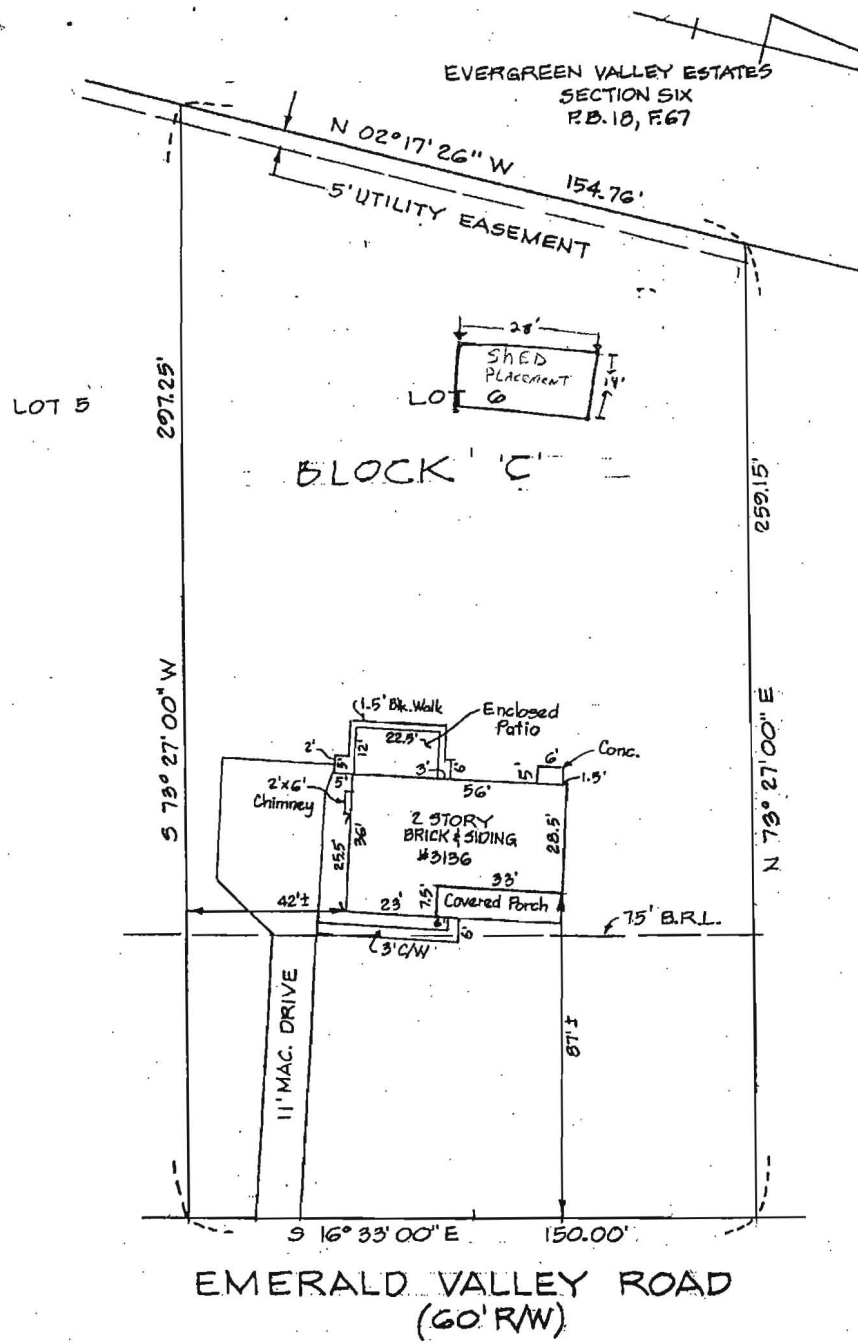
Development and Coordination

Phone (410) 313-2775

E-mail: dbernard@howardcountymd.gov

DLB

cc: Well & Septic program file



THE LOT SHOWN HEREON IS IN FLOOD
ZONE C PER F.E.M.A. FLOOD INSURANCE
RATE MAP PANEL # 2400440016B

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HICKS ENGINEERING CO., INC.
ENGINEERS, SURVEYORS, & PLANNERS
200 EAST JOPPA ROAD - SUITE 402
TOWSON, MARYLAND 21286-3160
(410) 494-0001

LOCATION DRAWING OF
#3126 EMERALD VALLEY ROAD, LOT 6,
EVERGREEN VALLEY ESTATES, SECTION SEVEN
PLAT REF: 24/61, DEED REF: 668/142
HOWARD COUNTY, MARYLAND
DATE: 12/2/03 SCALE: 1"=30' FILE: 24997

312000974

Building Address: 3136 Emerald Valley Rd

Suite/Apt. # _____ SDP/WP/BA #: _____

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: _____

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: DAVID MORSE

Address: 3136 Emerald Valley Rd

City: Ellicott City State: MD Zip Code: 21043

Home Phone: 410-313-6745 Work Phone: 410-245-1716

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

Phone: _____ Fax: _____

Email: _____

Existing Use: SFD

Proposed Use: SFD w/14 shed

Estimated Construction Cost: \$ 11,300.00

Description of Work: 14 x 28 STORAGE SHED

Contractor Company: HORIZON STRUCTURES

Contact Person: SENATOR CAMPBELL

Address: 5075 Lower Valley Rd

City: ATGLEN State: PA Zip Code: 19310

License No.: 6S-07F-0690W

Phone: 888-447-4337 Fax: 610-393-7701

Email: SCOTT@HORIZONSTRUCTURES.COM

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Engineer/Architect Company: Shed PreBuild

Responsible Design Prof.: 07/1/11

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
Area of construction (sq. ft.):	<u>Sewage Disposal</u>
Use group:	Electric: <input type="checkbox"/> Yes <input checked="" 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 st floor: <u>28'1"</u> <u>14'</u>	<input checked="" type="checkbox"/> Private
2 nd floor: <u>N/A</u>	<u>Sewage Disposal</u>
Basement: <u>N/A</u>	<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 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	

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Applicant's Signature: [Signature] Print Name: DANA MORSE

Email Address: MORSE3136EMERALDVALLEY@GMAIL.COM Date: 3/21/2012

Title/Company: Resident/Homeowner

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		
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

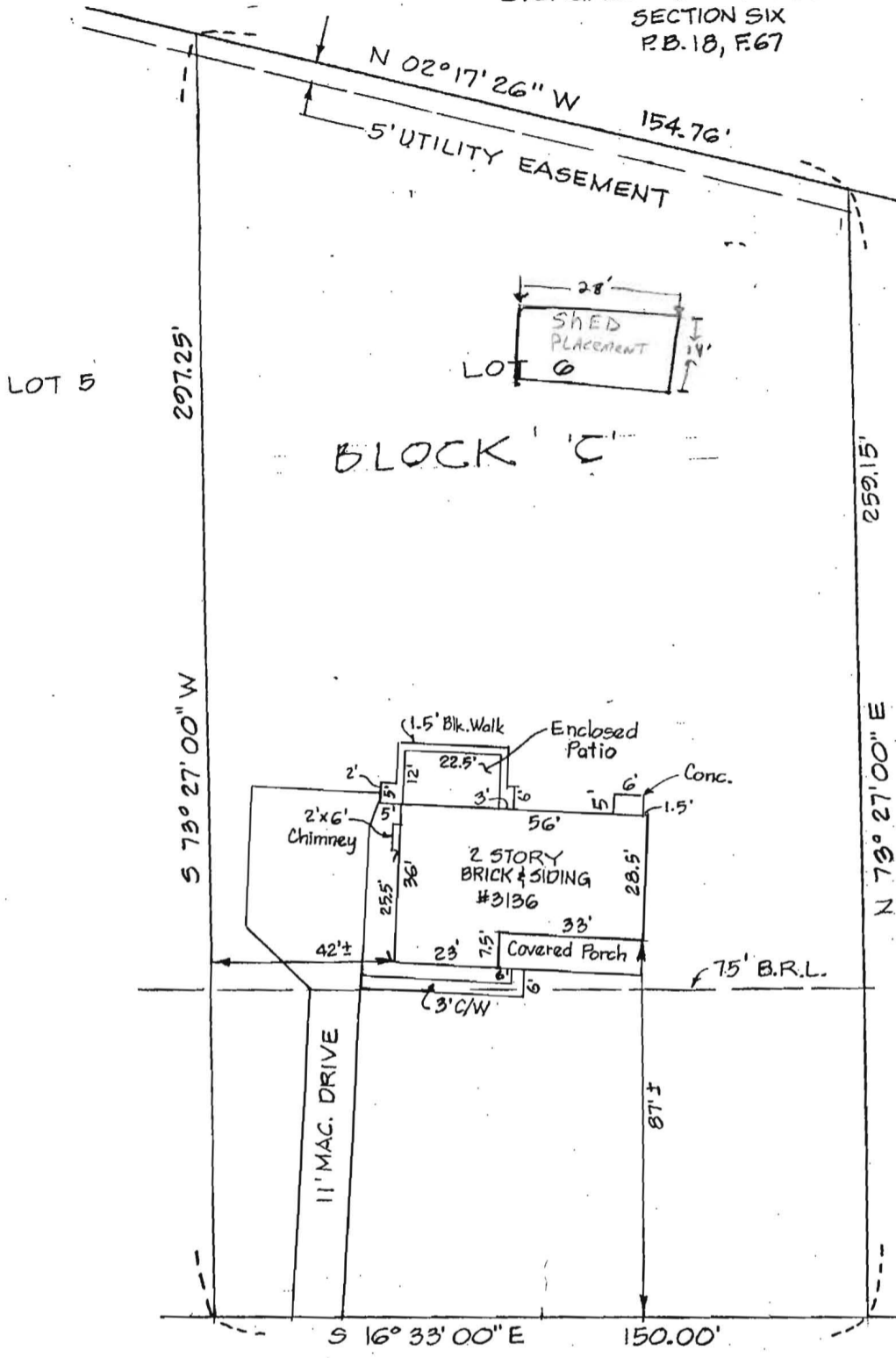
Lot Coverage for New Town Zone: _____

SDP/Red-line approval date: _____

Filing Fee	\$
Permit Fee	\$ <u>50</u>
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

3237

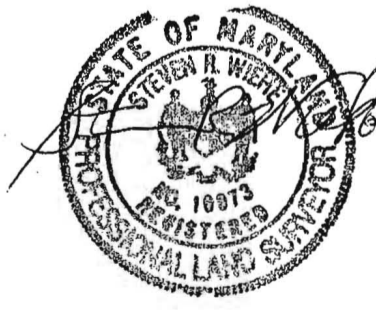
EVERGREEN VALLEY ESTATES
SECTION SIX
P.B. 18, F.67



EMERALD VALLEY ROAD
(60' R/W)

THE LOT SHOWN HEREON IS IN FLOOD
ZONE C PER F.E.M.A. FLOOD INSURANCE
RATE MAP PANEL # 2400440016B

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HICKS ENGINEERING CO., INC.
ENGINEERS, SURVEYORS & PLANNERS
200 EAST JOPPA ROAD - SUITE 402
TOWSON, MARYLAND 21286-3160
(410) 494-0001

LOCATION DRAWING OF
#3136 EMERALD VALLEY ROAD, LOT 6,
EVERGREEN VALLEY ESTATES, SECTION SEVI
PLAT REF: 24/01, DEED REF: 668/149
HOWARD COUNTY, MARYLAND
DATE: 12/2/03 SCALE: 1"=30' FILE: 2490

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B-147618

Building Address 3136 Emerald Valley Rd
Ellicott City MD 21042

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

Census Tract 6030 Subdivision Emerald

Section 7 Area _____ Lot 6

Tax Map RCDEO Parcel 100 Grid 20

Zoning _____ Map Coordinates 1086 Lot size _____

Property Owner's Name Dana Morgan

Address 3136 Emerald Valley Rd

City Ellicott City State MD Zip Code 21042

Home Phone 410 750 175 Work Phone 410 345 2716

Applicant's Name & Mailing Address, (if other than stated hereon):
Jeffrey Streib
2107 Hampshire Dr
Fallston MD 21047

Phone 410 258-2537 Fax 410 877-8633

Existing Use SFD

Proposed Use Small Deck

Estimated Construction Cost \$ 10,000

Description of Work 10' x 10' Deck

Contractor Company Streib Construction Co

Contact Person Jeff Streib

Address 2107 Hampshire Dr

City Fallston State MD Zip Code 21047

License No. 86022

Phone 410 258-2533 Fax 410 877-8632

Occupant or Tenant Owner

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	Utilities
Height: <u>7'</u>	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"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input checked="" type="checkbox"/> Wood Frame <input type="checkbox"/> 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: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
No. of Bedrooms _____	Propane Gas <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/>
No. of 1 BR units: _____	<input type="checkbox"/> NFPA #13D
No. of 2 BR units: _____	<input type="checkbox"/> NFPA #13R
No. of 3 BR units: _____	Other: _____
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof: _____	
<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 Jeffrey M. Streib

Title/Company Streib Construction Co. LLC

Print Name Jeffrey M. Streib

Date 4/22/04

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	<u>4-22-04</u>	<u>[Signature]</u>
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>4/22/04</u>	<u>[Signature]</u>
Fire Protection		

Is Sediment Control approval required prior to issuance?
YES NO

CONTINGENCY CONSTRUCTION START:

ONE STOP SHOP:

DPZ SETBACK INFORMATION	
Front:	<u>75</u>
Rear:	<u>30</u>
Side:	<u>10</u>
Side St.:	_____
All minimum setbacks met?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Is Entrance Permit required?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Historic District?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Lot Coverage for NewTown Zone	_____
SDP/Red-line approval date	_____

PROPERTY ID# <u>41886</u>	
Filing fee \$	_____
Permit fee \$	<u>90</u>
Excise tax \$	_____
Add'l per. fee \$	_____
TOTAL FEES \$	_____
Sub-total paid \$	_____
Balance due \$	_____
Check #	<u>1034</u>
Validation #	<u>45110</u>
Accepted by	_____

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

Copy

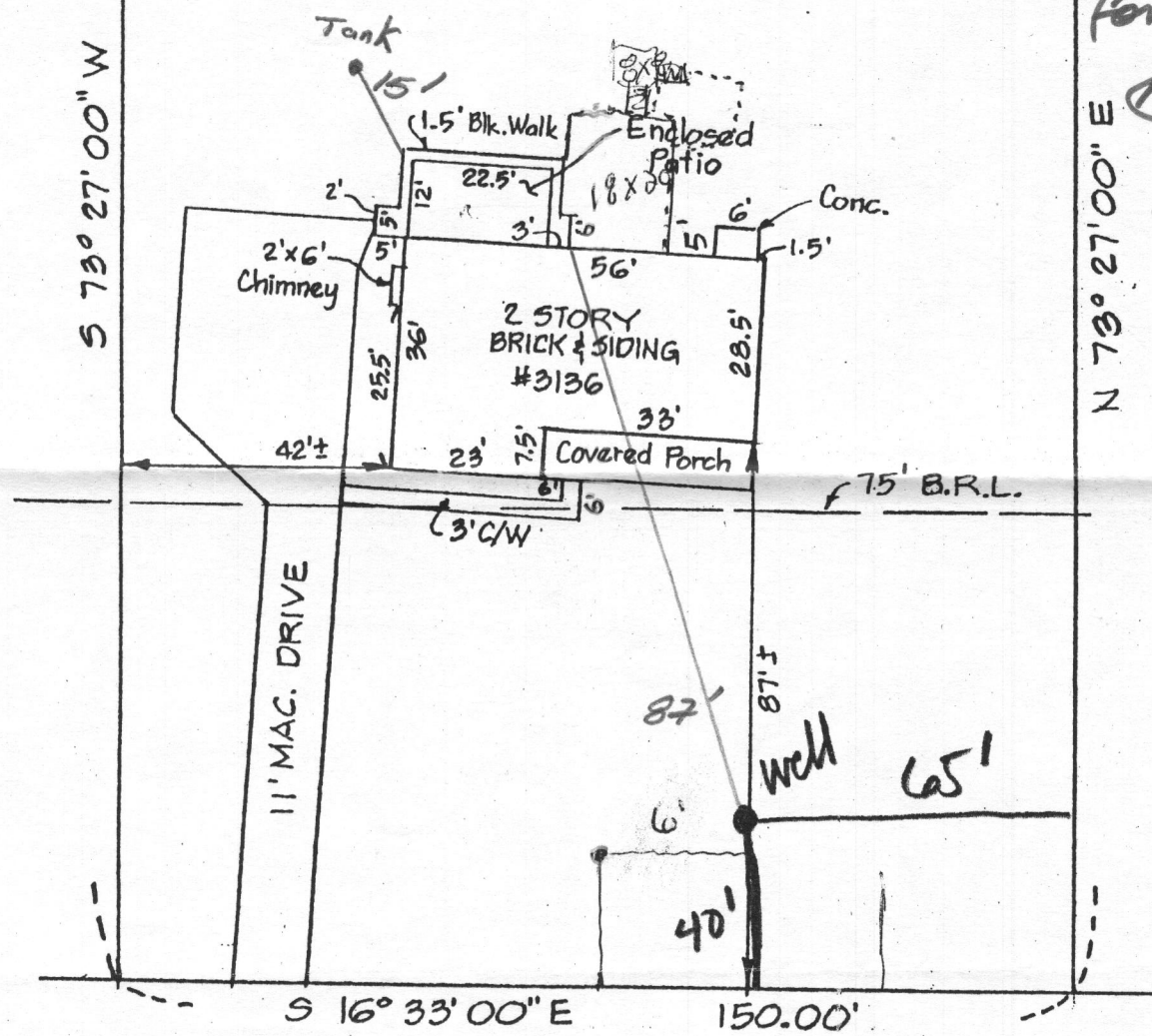
EVERGREEN VALLEY ESTATES
SECTION SIX
R.B. 18, F.67

LOT 5

LOT 6

BLOCK 'C'

Approved BP 00147618
for deck by
PH 4/22/04
Howard Co
Env. Health.



EMERALD VALLEY ROAD
(60' R/W)

THE LOT SHOWN HEREON IS IN FLOOD
ZONE C PER F.E.M.A. FLOOD INSURANCE
RATE MAP PANEL # 2400440016B

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HICKS ENGINEERING CO., INC.
ENGINEERS, SURVEYORS & PLANNERS
200 EAST JOPPA ROAD - SUITE 402
TOWSON, MARYLAND 21286-3160
(410) 494-0001

LOCATION DRAWING OF		
#3136 EMERALD VALLEY ROAD, LOT 6, EVERGREEN VALLEY ESTATES, SECTION SEVEN		
PLAT REF: 24/61, DEED REF: 668/149 HOWARD COUNTY, MARYLAND		
DATE: 12/2/03	SCALE: 1"=30'	FILE: 24997