

DEPARTMENT 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

**B07000073**

Building Address 14302 FANCY GOLF COURT  
KVILLE, MD 21043

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

Census Tract 104102 Subdivision MONTGOMERY

Section \_\_\_\_\_ Area 2 Lot 43

Tax Map 8 Parcel 110 Grid 18

Zoning RS-DEQ Map Coordinates \_\_\_\_\_ Lot size 1.14 ACRES

Property Owner's Name JIM & KELI SMITH

Address 2118 FANCY GOLF RD #1701

City ELLCOTT CITY State MD Zip Code 21043

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

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

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

Existing Use SEW

Proposed Use SEW

Estimated Construction Cost \$ 100,000

Description of Work CONSTRUCT NEW SEW TO  
REPLACE BURNED UNIT. NEW LINE  
TO INV. NEW DECK

Contractor Company ALLIANCE HOME UNLIMITED

Contact Person JIM BRUMSTED

Address 10260 OLD COLUMBIA RD

City COLUMBIA State MD Zip Code 21114

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

Phone 410-381-4114 Fax 410-381-1211

Occupant or Tenant N/A

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

Address \_\_\_\_\_

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

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

Engineer or Architect Company PRATT & ASSOCIATES

Contact Person TOM HIGGER

Address 8331 MAIN STREET

City ELLCOTT CITY State MD Zip Code 21043

Phone 410-465-9200 Fax 410-465-0903

### BUILDING DESCRIPTION - COMMERCIAL

### BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
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 <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <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"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
1st floor: <u>3497 sq'</u> 2nd floor: <u>1250 sq'</u> Basement: <u>3000 sq'</u>	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
No. of Bedrooms <u>4</u>	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/>
Height: _____	Sprinkler system: N/A <input type="checkbox"/> NFA #13D _____ NFA #13R _____ Other: _____
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 <input type="checkbox"/> Manufactured Home <input type="checkbox"/>	

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 [Signature]  
Title/Company \_\_\_\_\_

Print Name JIM BRUMSTED  
Date 1/8/07

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		
Dev. Engineering, DPZ		
Health	<u>1/23/07</u>	<u>[Signature]</u>
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	Filing fee \$ <u>100.00</u>
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met?	TOTAL FEES \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>4573</u>
Historic District?	Validation # _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	
Lot Coverage for NewTown Zone _____	
SDP/Red-line approval date _____	Accepted by _____

CONTINGENCY CONSTRUCTION START:   
ONE STOP SHOP:

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

MONTICELLO  
F-99-133  
PLAT 10486  
LOT 42

MONTICELLO  
F-99-133  
NON-BUILDABLE  
PRESERVATION PARCEL B  
EXISTING PUBLIC 20'  
DRAINAGE & UTILITY EASEMENT  
PLAT 10486  
N48°48'03"E 129.49'

MONTICELLO  
F-99-133  
PLAT 10486  
LOT 45

*\* new tank  
will have same inverts  
as existing*

PROP. INV. AT HOUSE	628.2
PROP. GRD. AT HOUSE	633.2
EX. INV. IN TANK	627.7
EX. INV. OUT TANK	627.4
EX. TOP OF TANK	628.7
EX. GROUND OVER TANK	631.0
EX. INV. IN DIST. BOX	627.2
EX. GROUND AT BOX	628.0

EXISTING SEWAGE  
DISPOSAL AREA

LOT 43  
50,000 S.F.

PROPOSED HOUSE  
FF=643.70  
BF=633.70

3-CAR  
SIDE LOAD  
GARAGE

PROP. PVMT.

Approved Septic System Plan  
Howard County Health Department  
*Signature*  
Date 1/23/07

**BENCHMARK**  
ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS  
**ENGINEERING, INC.**  
8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418  
ELLCOTT CITY, MARYLAND 21043  
PHONE: 410-465-6105 FAX: 410-465-6644  
www.bel-civilengineering.com

**MONTICELLO  
PERMIT PLOT PLAN  
LOT 43**  
14305 FOX CREEK COURT  
TAX MAP 8, GRID 18 - PARCEL 110  
ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

BUILDER:  
MR. JIM BRUMSTED  
ALLAN HOMES  
10260 OLD COLUMBIA ROAD  
COLUMBIA, MARYLAND 21046

HOUSE TYPE:  
DATE: DECEMBER 28, 2006 PROJECT NO. 1988  
SCALE: 1" = 30' DRAWING 1 OF 1