

Building Address 14 Fulton Ridge Dr
Frederick MD 20757

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

Census Tract _____ Subdivision Fulton Ridge

Section _____ Area _____ Lot 14

Tax Map 41 Parcel 1 Grid 13

Zoning RR-DEM Map Coordinates _____ Lot Size 1 acre

Existing Use Vacant
 Proposed Use SED
 Estimated Construction Cost \$ 200M

Description of Work 3 1/2 Park Bench
Front 2 story Colonial with
Basement

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name Leslie - Michael Kojanek
 Address 411 Bridgton Way
 City Ellicottsburg State MD Zip Code 21794
 Home Phone _____ Work Phone _____

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

Phone 410 795-3148 Fax _____

Contractor Company Viking Development Corp
 Contact Person Kevin Kojanek
 Address 815 W. Main St
 City Frederick State MD Zip Code 21784
 License No. 1185
 Phone 410 777-2888 Fax 410 459-7613

Engineer or Architect Company W.D. Williams

Contact Person Dennis

Address _____

City Frederick State MD Zip Code _____

Phone 301 695-7131 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

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 checked="" 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 <input type="checkbox"/> State Certified Modular	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 st floor: <u>37' x 50'</u> 2 nd floor: <u>37' x 50'</u> Basement: <u>36' x 56'</u>	Water Supply: _____ <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
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>	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> 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.

[Signature]
 Applicant's Signature
President Viking Development
 Title/Company

Kevin Kojanek
 Print Name
2-2-2010
 Date

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 \$ <u>100</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Officials			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per fee \$ _____
Health	<u>2-22-10</u>	<u>Heidi Roth</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 # <u>19599</u>
			Historic District?	Validation # _____
			YES <input type="checkbox"/> NO <input type="checkbox"/>	
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Accepted by _____

DEPARTMENT OF INSPECTIONS,
 LICENSES & PERMITS
 3430 COURT HOUSE DRIVE
 ELLICOTT CITY, MD 21043
 PERMITS (410) 313-2455
 INSPECTIONS (410) 313-1850

HOWARD COUNTY
 RESIDENTIAL
 HEATING-VENTILATION-AIR
 CONDITIONING AND
 REFRIGERATION PERMIT
 APPLICATION

HVACR PERMIT # m10000583
 BUILDING PERMIT #

B10000274

BUILDING ADDRESS: 12110 Fulton Ridge DR SUITE/APT:
 SUBDIVISION: Fulton
 CENSUS TRACT: SECTION: AREA:
 LOT: 14 TAX MAP: PARCEL:
 BLOCK: ZONE:
 PROPERTY ID: MAP COORDINATES:
 TYPE OF IMPROVEMENTS: USE:

OWNERS NAME: Krainak
 ADDRESS: 1611 Andryln way
 CITY: Eldersburg MD
 STATE: ZIP CODE:
 HOME PHONE: 410 795-3648 WORK PHONE:

CHECK ONE	HOW MANY
SINGLE FAMILY DWELLING <input checked="" type="checkbox"/>	<u>2</u> ZONES
SINGLE FAMILY TOWNHOUSE <input type="checkbox"/>	___ ZONES
MULTI-FAMILY / HOTEL/MOTEL <input type="checkbox"/>	___ ROOMS
ASSISTED LIVING HOMES (16 OR FEWER RESIDENTS) <input type="checkbox"/>	___ ROOMS

COMPANY NAME: A Quality HVAC
 LICENSEE NAME: Eari Post
 ADDRESS: 1824 Ridge Rd
 CITY: Westminster
 STATE: MD ZIP CODE:
 PHONE: 410 7519700 HVACR LICENSE NO: 4860

- New
- Heating and Air Conditioning
 - Geo Thermal System
 - Heating System Only
 - Ductless Mini Splits
 - Other Work (Describe):
 - Thru The Wall Systems
- Replacement
- Heating
 - Air Conditioning
 - Heating and Air Conditioning
- Additions and Alterations
- Heating
 - Air Conditioning
 - Heating and Air Conditioning

****Replacement Geo Thermal Systems are not required; However, if a tax credit is being sought a permit is required****

Zones

Permit Fee = # of Zones x \$40 = 80.00
 Technology Fee (10% of Permit Fee) = 8.00
 Plus Application Fee 50.00
 Total Fees Due = 138.00

Rooms

Permit Fee = # of Rooms x \$80 = _____
 Technology Fee (10% of Permit Fee) = _____
 Plus Application Fee \$50 50.00
 Total Fees Due = _____

I HAVE CAREFULLY EXAMINED AND READ THIS APPLICATION AND KNOW IT IS TRUE AND CORRECT. THE WORK DESCRIBED HEREIN WILL BE PERFORMED BY A STATE HVACR LICENSED PERSON(S), AND ALL WORK WILL BE PERFORMED IN COMPLIANCE WITH APPLICABLE CODES AND STANDARDS OF HOWARD COUNTY THE STATE OF MARYLAND.

SIGNATURE OF LICENSEE

DATE

PRINT NAME OF LICENSEE

Email Address

Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

Word doc: T:\Updated Forms\hvac application
 Rev:10.2009

Validation

Check Number: 15770
 Cash: _____
 Receipt Number: 209357

10/6/10 Need site plan showing ground loop loc. called Suter and A Quality HVAC. OK

10/2/10 Kim M. Wang, P.E. OK

DEPT. OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER <u>B11002704</u>
Building Address <u>12110 Fulton Ridge Dr.</u>		Property Owner's Name <u>Leslie & Mike KARJANAH</u> Address <u>12110 Fulton Ridge Dr</u> City <u>Fulton</u> State <u>MD</u> Zip Code <u>20757</u> Home Phone <u>410-461-6407</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated herein): <u>Tom Barina</u> <u>485 Dotsie Dr.</u> <u>Washington, MD 21158</u> Phone <u>410-751-6065</u> Fax <u>410-751-2232</u>	
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision <u>Fulton Ridge</u> Section _____ Area _____ Lot <u>14</u> Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot Size _____ Existing Use <u>SFD</u> Proposed Use <u>SFD with 5' Green Screen & Pool</u> Estimated Construction Cost \$ _____ Description of Work <u>20x15 Screen Enclosed with steps to garage</u> <u>10x9 Deck with 4' wide ramp to garage</u> Occupant or Tenant _____ Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____		Contractor Company <u>Russell + Rock Professionals</u> Contact Person <u>Tom Barina</u> Address <u>485 Dotsie Dr</u> City <u>Washington</u> State <u>MD</u> Zip Code <u>21158</u> License No. <u>73872</u> Phone <u>410-751-6065</u> Fax _____ Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 st floor: _____ 2 nd floor: _____ Basement: _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	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"/>	No. of Bedrooms: _____	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"/>	Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	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 _____	Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ State Certified Modular _____ Manufactured Home _____	Sprinkler system: N/A <input type="checkbox"/> NFA #13D _____ NFA #13R _____ Other: _____

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Tom Barina
 Applicant's Signature _____ Print Name Tom Barina
 Email Address _____
Russell + Rock Professionals
 Title/Company _____ Date Sept 15, 2011

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

AGENCY	DATE	SIGNATURE APPROVAL	FOR OFFICE USE ONLY	PROPERTY ID #
Land Development: DPZ			DPZ SETBACK INFORMATION	
State Highways			Front: _____	Filing fee: \$ _____
Building Officials			Rear: _____	Permit fee: \$ _____
Dev. Engineering: DPZ			Side: _____	Excise tax: \$ _____
Health: <u>9-15-11</u>		<u>Meredith Smith</u>	Side St: _____	Add'l per fee: \$ _____
Fire Protection			All minimum setbacks met? _____	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Is Entrance Permit Required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due: \$ _____
ONE STOP SHOP: <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
			Lot Coverage for New Town Zone _____	Validation # _____
			SDP/Red-line approval date _____	Accepted by _____

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

LOT 12

DRIVE PLACE

10' PUBLIC TREE MAINTENANCE EASEMENT

17"x13" CMPA PER F-06-111 20 LF @ 2.00%

RIDGE ACCESS

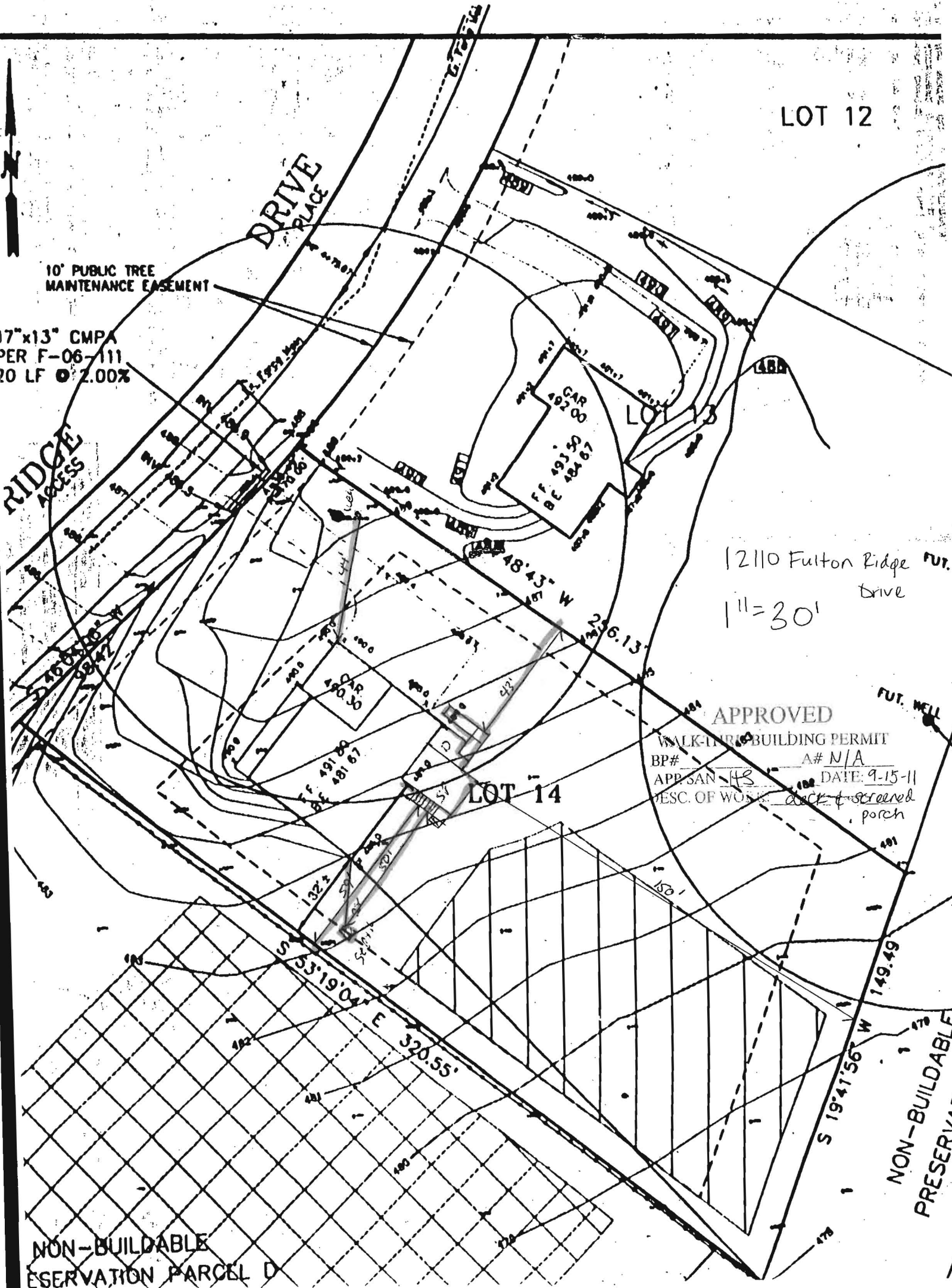
12110 Fulton Ridge fut. drive
1" = 30'

APPROVED
WALK-THRU BUILDING PERMIT
BP# _____ A# N/A
APP. SAN. HS DATE: 9-15-11
DESC. OF WORK: deck + screened porch

LOT 14

NON-BUILDABLE PRESERVATION PARCEL D

NON-BUILDABLE PRESERVATION



PERMANENT SEEDING NOTES
Apply to graded or cleared areas not subject to immediate further disturbance where a permanent long-lived vegetative cover is needed.

Seedbed Preparation: Loosen upper three inches of soil by raking, disking or other acceptable means before seeding, if not previously loosened.

Soil Amendments: In lieu of soil test recommendations, use one of the following schedules:
1. Preferred - Apply 2 tons/acre dolomitic limestone (92 lbs/1000 sq. ft.) and 600 lbs/acre 10-10-10 fertilizer (14 lbs/1000 sq. ft.) before seeding. Harrow or disk into upper three inches of soil at time of seeding, apply 400 lbs/acre 30-0-0 ureaform fertilizer (9 lbs/1000 sq. ft.).
2. Acceptable - Apply 2 tons/acre dolomitic limestone (92 lbs/1000 sq. ft.) and 1000 lbs/acre 10-10-10 fertilizer (23 lbs/1000 sq. ft.) before seeding. Harrow or disk into upper three inches of soil.

Seeding: For the periods March 1 - April 30, and August 15 - October 15, seed with 60 lbs/acre (1.4 lbs/1000 sq. ft.) of Kentucky 31 Tall Fescue. For the period May 1 - July 31, seed with 60 lbs Kentucky 31 Tall Fescue per acre and 2 lbs/acre (.05 lbs/1000 sq. ft.) of weeping lovegrass. During the period of October 16 - February 28, project site is to be:
Option 1 - Two tons per acre of well anchored straw mulch and seed as soon as possible in the spring.
Option 2 - Use seed. Option 3 - Seed with 60 lbs/acre Kentucky 30 Tall Fescue and mulch with 2 tons/acre well anchored straw.

Mulching: Apply 1-1/2 to 2 tons per acre (70 to 90 lbs/1000 sq. ft.) of unrotted small grain straw immediately after seeding. Anchor mulch immediately after application using mulch anchoring tool or 218 gallons per acre (5 gal/1000 sq. ft.) of emulsified asphalt on flat areas. On slope 8 feet or higher, use 348 gallons per acre (8 gal/1000 sq. ft.) for anchoring.

Maintenance: Inspect all seeding areas and make needed repairs, replacements and reseedings.

TEMPORARY SEEDING NOTES
Apply to graded or cleared areas likely to be re-disturbed where a short-term vegetative cover is needed.

Seedbed preparation: Loosen upper three inches of soil by raking, disking or other acceptable means before seeding, if not previously loosened.

Soil Amendments: Apply 600 lbs/acre 10-10-10 fertilizer (14 lbs/1000 sq. ft.).

Seeding: For periods March 1 - April 30 and from August 15 - October 15, seed with 2-1/2 bushel per acre of annual rye (3.2 lbs/1000 sq. ft.). For the period May 1 - August 14, seed with 3 lbs/acre of weeping lovegrass (.07 lbs/1000 sq. ft.). For the period November 16 - February 28, protect site by applying 2 tons/acre of well anchored straw mulch and seed as soon as possible in the spring, or use sod.

Mulching: Apply 1-1/2 to 2 tons/acre (70 to 90 lbs/1000 sq. ft.) of unrotted weed-free, small grain straw immediately after seeding. Anchor mulch immediately after application using mulch anchoring tool or 218 gal per acre (5 gal/1000 sq. ft.) of emulsified asphalt on flat areas. On slope 8 feet or higher, use 348 gal per acre (8 gal/1000 sq. ft.) for anchoring.

STANDARD SEDIMENT CONTROL NOTES
1. A minimum of 48 hours notice must be given to the Howard County Department of Inspections, Licenses and Permits, Sediment Control Division prior to the start of any construction (313-1855).

2. All vegetative and structural practices are to be installed according to the provisions of this plan and are to be in conformance with the most current MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL and revisions thereto.

3. Following initial soil disturbance or re-disturbance, permanent or temporary stabilization shall be completed within: a) 7 calendar days for all perimeter sediment control structures, dikes, perimeter slopes and all slopes greater than 3:1, b) 14 days as to all other disturbed or graded areas on the project site.

4. All sediment traps/basins shown must be fenced and warning signs posted around their perimeter in accordance with Vol. 1, Chapter 12 of the HOWARD COUNTY DESIGN MANUAL, Storm Drainage.

5. All disturbed areas must be stabilized within the time period specified above in accordance with the 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL for permanent seeding (Sec. 51), sod (Sec. 54), temporary seeding (Sec. 50) and mulching (Sec. 52). Temporary stabilization with mulch alone can only be done when recommended seeding dates do not allow for proper germination and establishment of grasses.

6. All sediment control structures are to remain in place and are to be maintained in operative condition until permission for their removal has been obtained from the Howard County Sediment Control Inspector.

7. Site Analysis:
Total Area of Site 17123 SQ. FT.
Area Disturbed 4781 SQ. FT.
Area to be roofed or paved 12342 SQ. FT.
Total Cut 351 CU. YDS.
Total Fill 406 CU. YDS.
Offsite waste/borrow area location: NONE

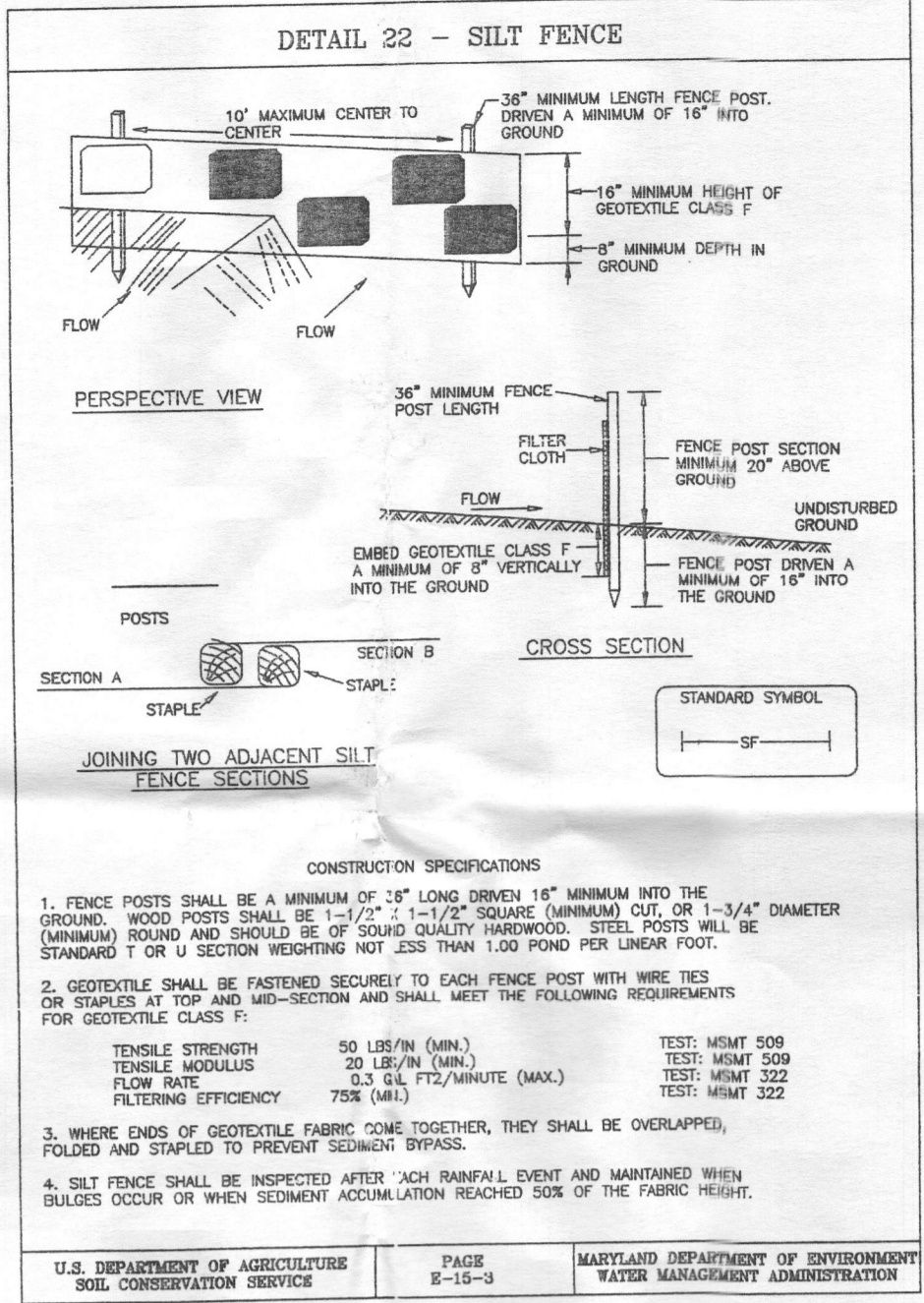
8. Any sediment control practice which is disturbed by grading activity for placement of utilities must be repaired on the same day of disturbance.

9. Additional sediment control must be provided, if deemed necessary by the Howard County Sediment Control Inspector.

10. On all sites with disturbed areas in excess of 2 acres, approval of the inspection agency shall be requested upon completion of installation of perimeter erosion and sediment controls, but before proceeding with any other earth disturbance or grading. Other building or grading inspection approvals may not be authorized until this initial approval by the inspection agency is made.

11. Trenches for the construction of utilities is limited to three pipe lengths or that which shall be back-filled and stabilized by the end of each work day, whichever is shorter.

12. The Total Amount Of Silt Fence = 368 LF
The Total Amount Of Super Silt Fence = 0 LF



CONSTRUCTION SPECIFICATIONS
1. FENCE POSTS SHALL BE A MINIMUM OF 3/4" LONG DRIVEN 1/4" MINIMUM INTO THE GROUND. WOOD POSTS SHALL BE 1 1/2" x 1 1/2" SQUARE HARDWOOD. STEEL POSTS WILL BE STANDARD T OR U SECTION RESISTING NOT LESS THAN 1300 POUND PER LINEAR FOOT.
2. GEOTEXTILE SHALL BE FASTENED SECURELY TO EACH FENCE POST WITH WIRE TIES OR STAPLES AT TOP AND MID-SECTION AND SHALL MEET THE FOLLOWING REQUIREMENTS FOR GEOTEXTILE CLASS F:
TENSILE STRENGTH 50 LBS/IN (MIN)
TENSILE MODULUS 20 LBS/IN (MIN)
FLOW RATE 2.0 GAL/72 MINUTE (MAX)
FILTERING EFFICIENCY 70% (MIN)
3. WHERE ENDS OF GEOTEXTILE FABRIC COME TOGETHER, THEY SHALL BE OVERLAPPED, FOLDED AND STAPLED TO PREVENT SEDIMENT BYPASS.
4. SILT FENCE SHALL BE INSPECTED AFTER EACH RAINFALL EVENT AND MAINTAINED WITH BULKES OCCUR OR WHEN SEDIMENT ACCUMULATION REACHED SIDE OF THE FABRIC HEIGHT.

U.S. DEPARTMENT OF AGRICULTURE SOIL CONSERVATION SERVICE PAGE 8-15-3 MARYLAND DEPARTMENT OF ENVIRONMENTAL WATER MANAGEMENT ADMINISTRATION

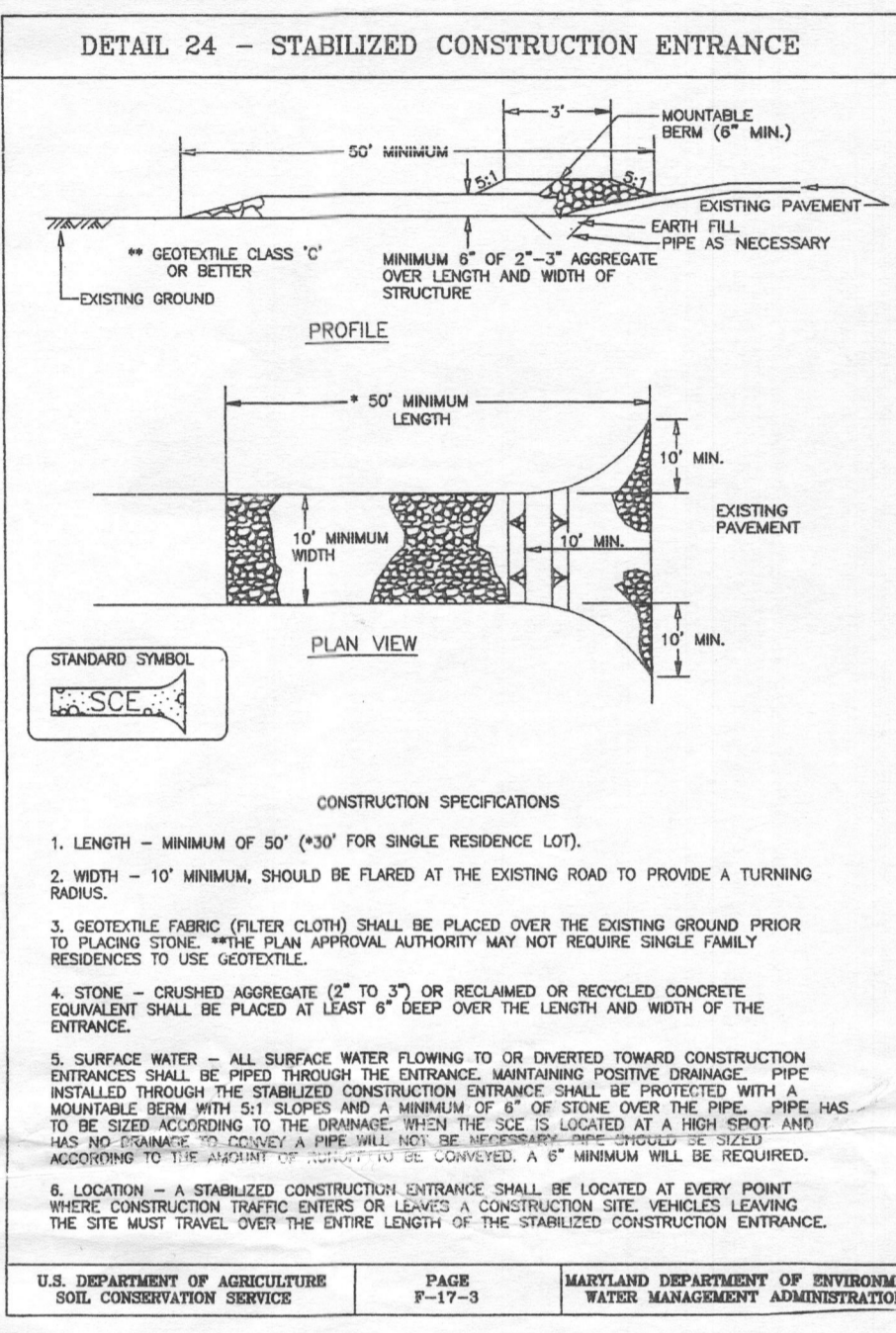
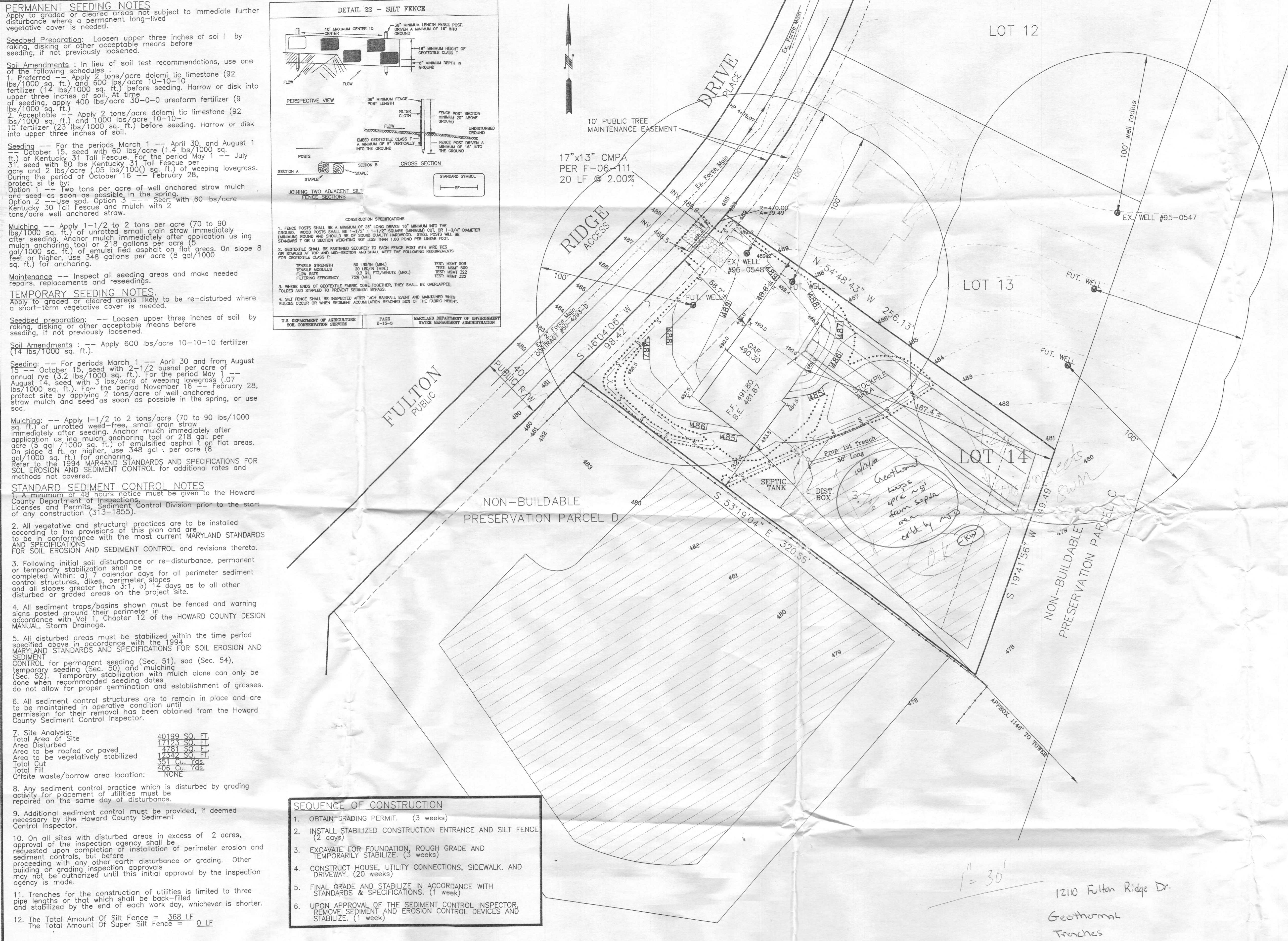
THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD COUNTY SOIL CONSERVATION DISTRICT.
John R. Robertson 2/1/10 DATE
HOWARD SCD

DEVELOPER'S CERTIFICATE
I, CERTIFY THAT ALL DEVELOPMENT AND/OR CONSTRUCTION WILL BE DONE ACCORDING TO THESE PLANS, AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF NATURAL RESOURCES APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC SITE INSPECTION BY THE HOWARD COUNTY SOIL CONSERVATION DISTRICT.
John R. Robertson 2/2/10 DATE
NAME AND TITLE

CONSULTANT'S CERTIFICATE
I, CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS. THIS PLAN WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD COUNTY SOIL CONSERVATION DISTRICT.
G. Scott Shanaberger 2/2/10 DATE
G. SCOTT SHANABERGER PROFESSIONAL L.S. #10849

SHANABERGER & LANE
8726 TOWN & COUNTRY BLVD.
SUITE 201
ELLCOTT CITY, MD. 21043
PHONE: 410-461-9563
FAX: 410-461-9693

DEVELOPER
VIKING DEVELOPMENT
816 WINDRIVER DR.
SYKESVILLE, MD 21784
(410) 977-2188



- NOTES:**
- TOPOGRAPHY SHOWN HEREON WAS FIELD-RUN BY SHANABERGER & LANE IN DECEMBER, 2009.
 - PRIVATE SEWAGE EASEMENT.
 - THE EXISTING WELL SHOWN ON THIS PLAN WAS FIELD-LOCATED IN DECEMBER, 2009.
 - THERE ARE NO STEEP SLOPES OF 25% OR GREATER ON THIS LOT.
 - BEARINGS AND DISTANCES SHOWN HEREON ARE FROM PLAT #18906.
 - LEGEND
 - DESIGNATES LIMIT OF DISTURBANCE
 - - - - - DESIGNATES PROPOSED SILT FENCE
 - DESIGNATES EXISTING CONTOUR
 - [---] DESIGNATES PROPOSED CONTOUR
 - 489x3 DESIGNATES PROPOSED SPOT ELEVATION
 - DESIGNATES BUILDING RESTRICTION LINE

SEPTIC SYSTEM DATA

HOUSE INV. AT HOUSE	479.67
SEPTIC TANK EX. GRADE	483.2
FIN. GRADE	483.2
INV. IN	479.27
INV. OUT	478.97
DISTRIBUTION BOX EX. GRADE	482.8
FIN. GRADE	482.8
INV. IN	478.90
INV. OUT	478.60

TRENCH INVERTS, NUMBER, & LENGTH TO BE DETERMINED BY BUREAU OF ENVIRONMENTAL HEALTH
GRAVITY SEWER SERVICE IS AVAILABLE TO BASEMENT LEVEL.

GP-10-47
GRADING, SEDIMENT & EROSION CONTROL PLAN
LOT 14 FULTON RIDGE
SHEET 1 OF 1
PLAT #18906 ZONING: RR-DEO
TAX MAP 41 GRID 13 PARCEL 2
5TH ELECTION DIST. HOWARD COUNTY, MD.
SCALE: 1"=30' DECEMBER 19, 2009
REV. DECEMBER 21, 2009, JANUARY 28, 2010