



# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
www.howardcountymd.gov

Date Received: 7/8/15

Permit No.: B15003053

Building Address: 716 Woodbine Crossing Road  
 City: Mount Airy State: Md Zip Code: 21771  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Woodbine Crossing  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 13  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 1.2028ac.

Existing Use: \_\_\_\_\_  
 Proposed Use: RESIDENTIAL  
 Estimated Construction Cost: \$ 804.95  
 Description of Work: INSTALL 1-1000LB GALLON LP UNDERGROUND TANK W/ 1/2 INCH GAS LINE, Hook-up to Stub-out @ House ALL WORK OUTSIDE  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: LDC Inc. Ste 203  
 Address: 8601 Georgia Ave Lee Plaza 203  
 City: Silver Spring State: Md. Zip Code: 20910  
 Phone: 301-5837000 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

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

Contractor Company: Thompson Gas  
 Contact Person: David White  
 Address: 1850 DURL Highway Ste 203  
 City: HAGERSTOWN State: Md. Zip Code: 21740  
 License No.: 60003 J. Randall Thompson  
 Phone: 301-432-6611 Fax: 304-725-8476  
 Email: dwhite@thompsongas.com

Engineer/Architect Company: \_\_\_\_\_  
 Responsible Design Prof.: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SE Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Heating System</b>	
<input type="checkbox"/> Electric	<input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas	<input checked="" type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
Grading Permit Number:	
Building Shell Permit Number:	

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: David White  
 Email Address: dwhite@thompsongas.com  
 Title/Company: Territory Sales Manager

Print Name: David White  
 Date: 7-7-15  
 RECEIVED  
 JUL 08 2015  
 LICENSES & PERMITS DIVISION

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>7/29/15</u>	<u>H. Oswood</u>

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

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	\$ 100.00
Tech Fee	\$ 10.00
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ 110.00
Sub-Total Paid	\$
Balance Due	\$
Check	# 1031

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

Date: 7-24-15

To: MARCUS POWELL Dept. Inspections, Licenses & Permit  
(Person's Name and Division) Thompson

From: DAVID WHITE GAS (304) 279-3100  
(Your Name, Company Name and Telephone Number)

Subject: Project name Woodbine Crossing Lot #13  
Project site address 716 Woodbine Crossing Rd  
Permit # B15003053 SDP # \_\_\_\_\_  
Other information pertinent to this project \_\_\_\_\_

Please check the attachments below that you are submitting with this transmittal:

- Letter of response to address plan review comment letter
- Revised plans and/or revised details: When submitting for a complete re-review, duplicate sets shall be submitted.
- Letter Summarizing Changes
- Energy conservation calculations
- Copies of \_\_\_\_\_ (be specific).
- Health Department Request  DPZ/DED Request  Applicant's Request
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # \_\_\_\_\_
- Other \_\_\_\_\_

**Contact Person Information: (Required)**

DAVID WHITE Telephone No: 304-279-3100  
Please Print Name  
[Signature] and [Signature] E-Mail Address: dwhite@thompson

**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 410-313-2455. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.**

Received by [Signature]

#B15001618

LIBER | 5637 FOLIO 385



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia, MD 21046-2147
Main: 410-313-2640 | Fax: 410-313-2648
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org
Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

000036

OPERATION AND MAINTENANCE AGREEMENT
FOR AN ON-SITE SEWAGE DISPOSAL SYSTEM
HAVING AN ADVANCED PRE-TREATMENT SYSTEM

THIS AGREEMENT is made this 28 day of May, 2014, among
LDG, Inc., hereinafter collectively referred to as
"Owner", and the Howard County Health Department hereinafter referred to as the
"County".

Handwritten initials and marks on the left margin.

WHEREAS, Owner is the owner or contract owner of a parcel of land located at
720 Woodbine Crossing, Woodbine, MD 21797 (Lot 13), in the 04 Election District of Howard
County, Maryland, and the deed to same is recorded or shall be recorded among the Land
Records of Howard County, Maryland in Liber 1988 Folio 258.

WHEREAS, The Lot is suitable for the installation of a conventional on-site sewage
disposal system with an advanced pre-treatment system, utilizing best available
technology to perform nitrogen reduction, in accordance with the Code of Maryland
Regulations 26.04.02.07, effective January 1, 2013.

NOW, THEREFORE, the parties hereto agree as follows:

- A. Owner hereby grants to the County the right to enter upon the Lot at any reasonable
time for access to the system to make periodic inspections and the Owner agrees to
provide any information and data in Owner's possession reasonably requested and
needed by the County to develop accurate and thorough test results.
B. Owner acknowledges and agrees that neither the County nor any of its agents or
employees, either officially or individually, underwrites the operation of any system
approved by them.
C. The Owner will devote reasonable care and effort to the operation and maintenance of
the system in perpetuity or until a public sewer connection is made so that a system
malfunction is not the result of poor maintenance, faulty operation, or neglect.
D. The Owner agrees to enter into a contract reasonably acceptable to the Owner and the
County with a private entity to operate and maintain on a regularly scheduled basis an
approved advanced pre-treatment system. The owner shall supply a copy of the contract
to the County when it is renewed or altered.
E. This agreement shall run with the land and upon Owner's taking title to the Lot shall
bind the Owner, their heirs, successors, and assigns to the provisions of the agreement as



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

Date: 7-24-15

To: MARCUS POWELL Dept. Inspections Licenses & Permits  
(Person's Name and Division) Thompson

From: DAVID WHITE GAS (304) 279-3100  
(Your Name, Company Name and Telephone Number)

Subject: Project name Woodbine Crossing Lot #13  
Project site address 716 Woodbine Crossing Rd  
Permit # B15003053 SDP # \_\_\_\_\_  
Other information pertinent to this project \_\_\_\_\_

Please check the attachments below that you are submitting with this transmittal:

- Letter of response to address plan review comment letter
- Revised plans and/or revised details: When submitting for a complete re-review, duplicate sets shall be submitted.
- Letter Summarizing Changes
- Energy conservation calculations
- Copies of Plot plan (be specific).  
 Health Department Request     DPZ/DED Request     Applicant's Request
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # \_\_\_\_\_
- Other \_\_\_\_\_

**Contact Person Information: (Required)**

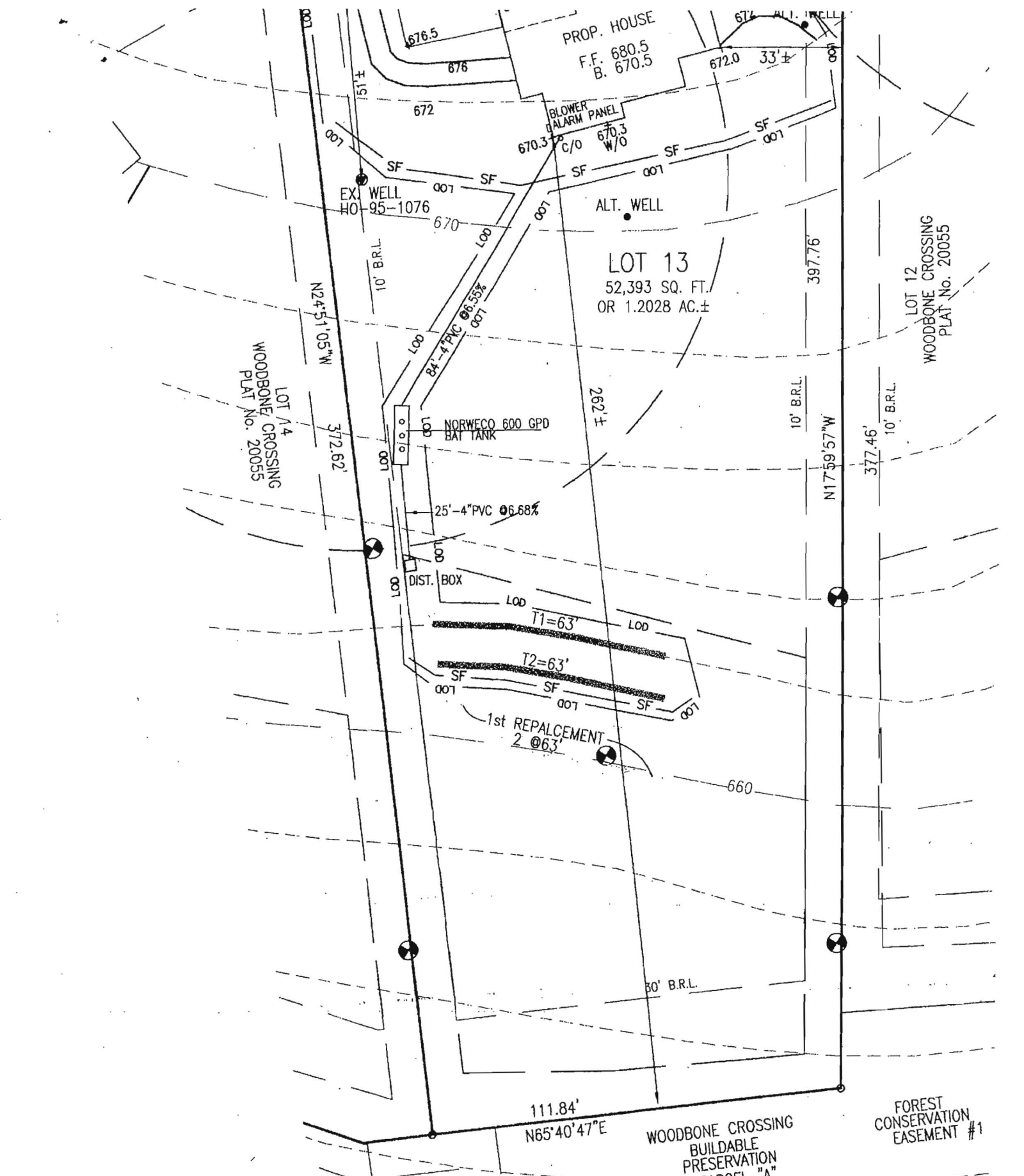
DAVID WHITE  
Please Print Name

Telephone No: 304-279-3100

E-Mail Address: dwhite@thompsongas.com

**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 MF



REVISED

Date: 7-28-15

Comments: Revised plot plan to reflect correct lot



# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
www.howardcountymd.gov

Date Received: 5-1-15

Permit No.: B15001618

Building Address: 720 Woodbine Crossing Rd  
 City: Woodbine State: MD Zip Code: 21771  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Woodbine Crossing  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 13  
 Tax Map: 0002 Parcel: 2523 Grid: 0024  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 1.2028

Existing Use: Vacant  
 Proposed Use: SFD  
 Estimated Construction Cost: \$ 212,000.00  
 Description of Work: Whitehall Model - 2 story  
10 fin steel basement 2 car  
garage  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: LDG, Inc.  
 Address: 8601 Greenback Avenue  
 City: Silver Spring State: MD Zip Code: 20910  
 Phone: 301-585-7000 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: Cahnsville Homes, LLC  
 Address: 1175 Shattuck Court  
 City: Marylandville State: MD Zip Code: 21104  
 Phone: 410-442-2211 Fax: 410-442-2215  
 Email: pwaller@cahnsvillehomes.com

Contractor Company: Cahnsville Homes, LLC  
 Contact Person: Frank E. Dolan, III  
 Address: 1175 Shattuck Court  
 City: Marylandville State: MD Zip Code: 21104  
 License No.: 13853159 / MHBR#9410  
 Phone: 410-442-2211 Fax: 410-442-2215  
 Email: pwaller@cahnsvillehomes.com

Engineer/Architect Company: Plymouth Road Architects  
 Responsible Design Prof.: Lisa Warrich  
 Address: 640 Plymouth Road  
 City: Cahnsville State: MD Zip Code: 21229  
 Phone: 410-788-0281 Fax: 410-788-1033  
 Email: lwarrich@plymouthroad.com

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	<u>Depth</u>	<u>Width</u>
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input checked="" type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>4</u>	
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> <b>Roadside Tree Project Permit</b>	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Heating System</b>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>615000145</u>	
Building Shell Permit Number:	

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: pwaller@cahnsvillehomes.com  
 Title/Company: Member Cahnsville Homes, LLC

Print Name: Frank E. Dolan III  
 Date: 4/30/15

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>6/15/15</u>	<u>H. Oswald</u>

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

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	\$ <u>100</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>21545</u>

## Oswald, Hank

---

**From:** Oswald, Hank  
**Sent:** Friday, July 24, 2015 8:19 AM  
**To:** 'dwhite@thompsongas.com'  
**Subject:** B15003051 and B15003053

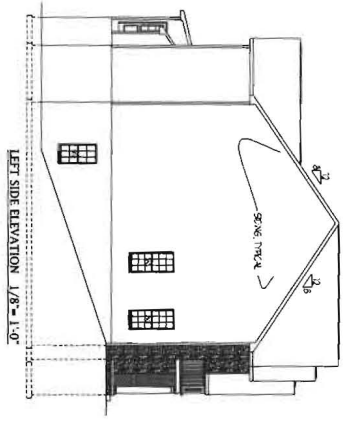
David White:

Upon review of the building permits noted in the subject heading, the site plans were submitted incorrectly/mismatched. Application for lot 11 has lot 13's site plan and vice versa.

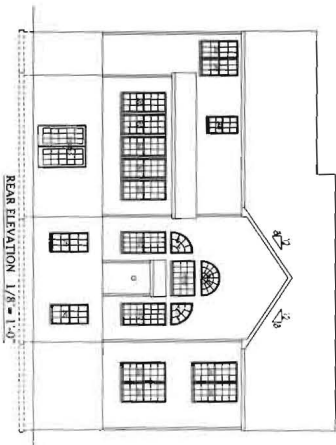
Please notify the permits office of this error.

Hank

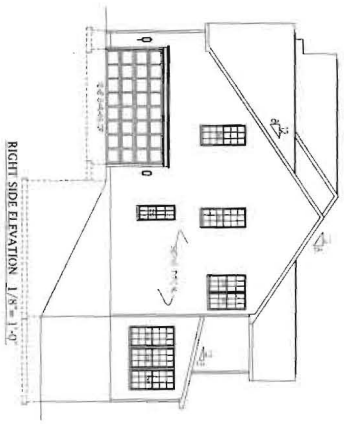
Hank Oswald, L.E.H.S.  
Howard County Health Department  
Bureau of Environmental Health  
Well & Septic Program  
410.313.1786



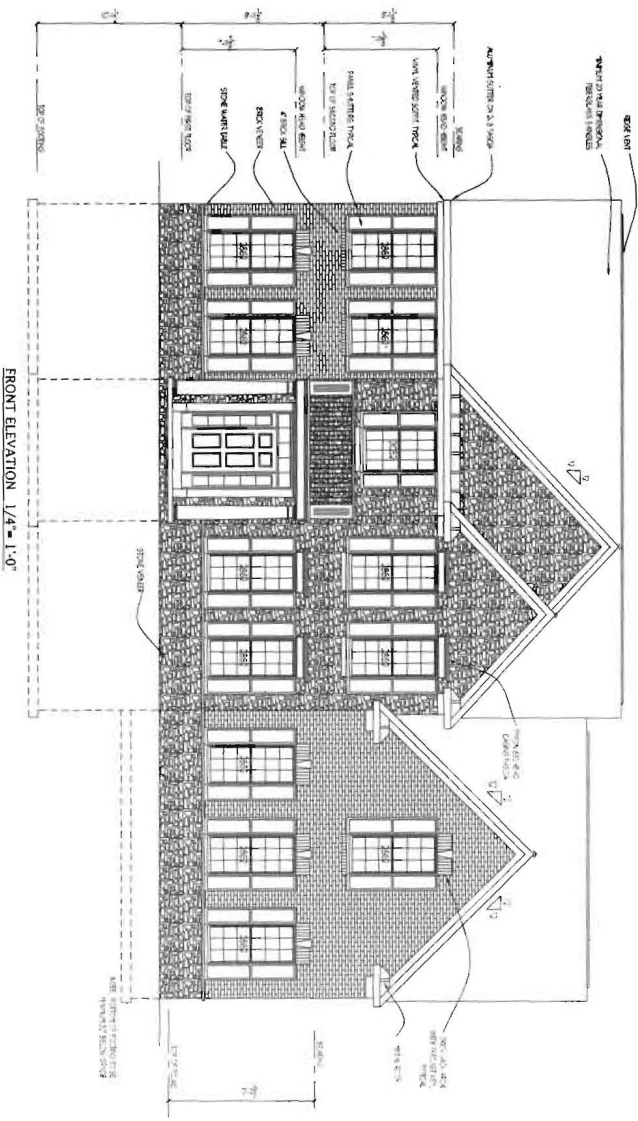
TOP OF FINISH  
TOP OF ROOF  
FINISH



TOP OF FINISH  
TOP OF ROOF  
FINISH



TOP OF FINISH  
TOP OF ROOF  
FINISH



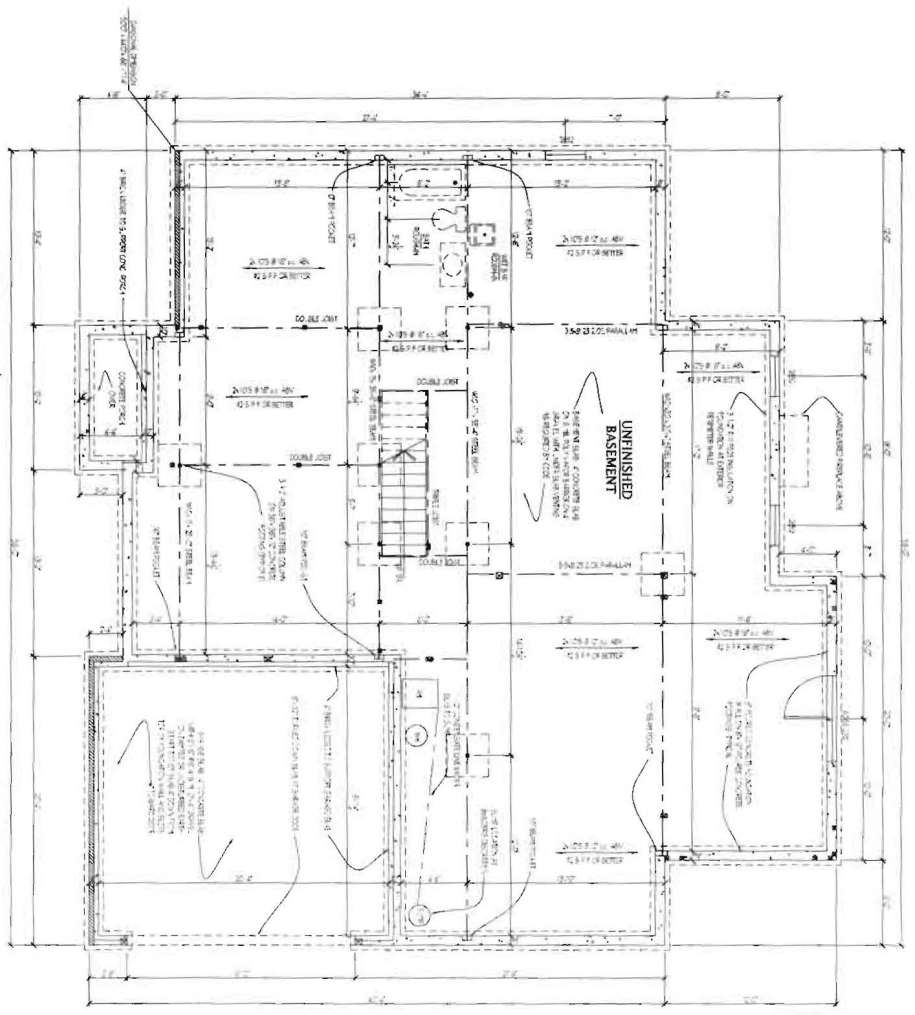
TOP OF FINISH  
TOP OF ROOF  
FINISH

FINAL SET 4/28/15

230281734

<b>1</b>	Project No.: C15.04	Drawing: ELEVATIONS	FL1 SQ.FT: 2060
	Date: 4/15	Project: CATONSVILLE HOMES WHITEHALL WOODBINE CROSSING LOT 13	L2 SQ.FT: 1660
	Scale: NUTLD		Notes:

**Plymouth Road Architects**  
640 Plymouth Road, Baltimore, MD 21229. 410-788-0281  
PlymouthRoadArchitects.com



FINAL SET 4/28/15

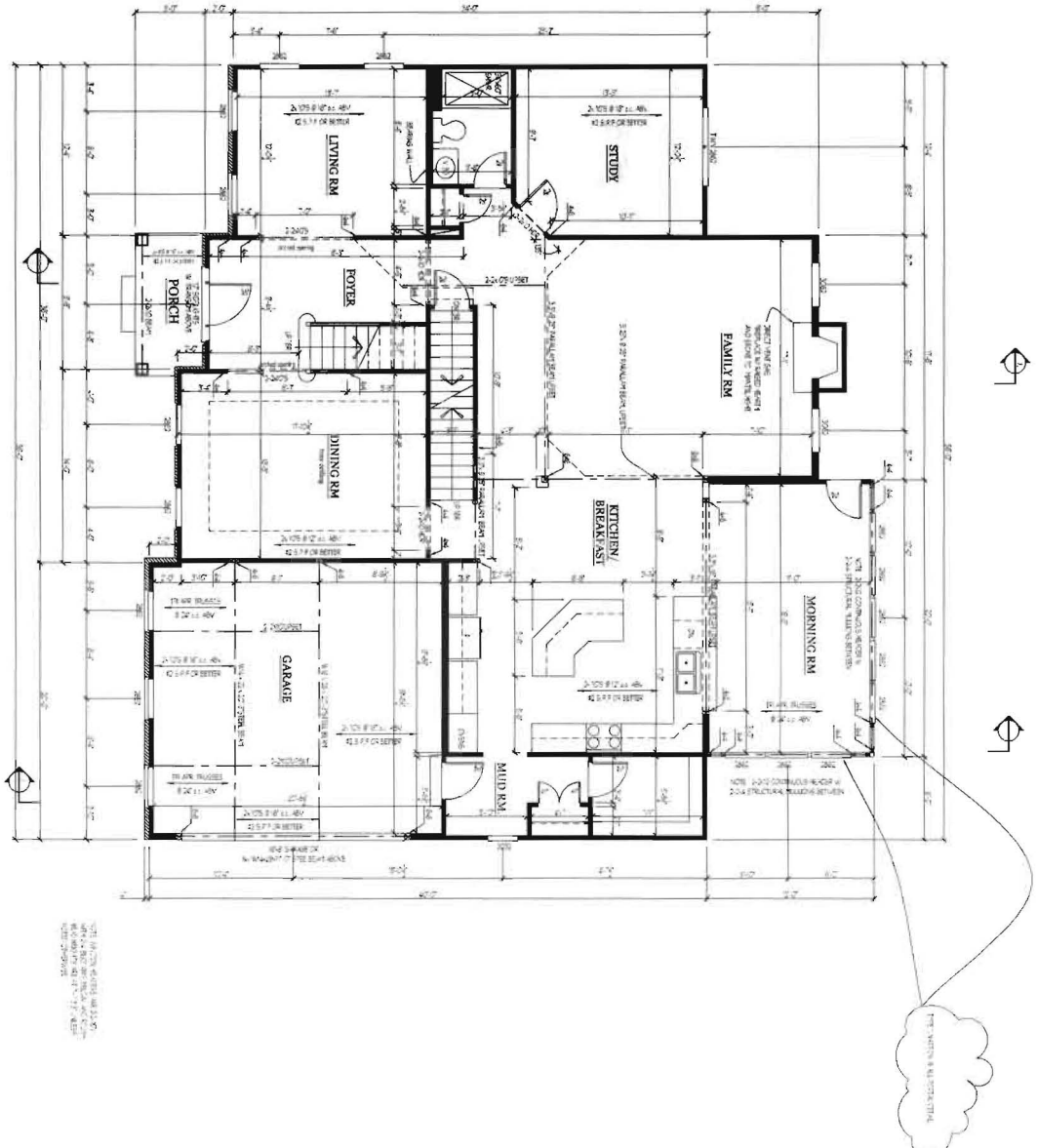
2

Project No.: C15.04  
 Date: 4/13  
 Scale: 1/4"=1'-0"

Drawing: BASEMENT/ FOUNDATION PLAN  
 Project: CATONSVILLE HOMES  
 WHITEHALL  
 WOODBINE CLOSING LOT 13

Notes:

**Plymouth Road Architects**  
 640 Plymouth Road, Baltimore, MD 21229, 410-788-0281  
 PlymouthRoadArchitects.com



NOTES:  
 1. ALL DIMENSIONS ARE IN FEET AND INCHES.  
 2. DIMENSIONS ARE TO FACE UNLESS NOTED OTHERWISE.  
 3. FINISHES ARE TO BE SPECIFIED BY THE ARCHITECT.  
 4. SEE SCHEDULE FOR MATERIALS AND FINISHES.  
 5. SEE NOTES ON OTHER SHEETS FOR ADDITIONAL INFORMATION.

FINAL SET 4/28/15

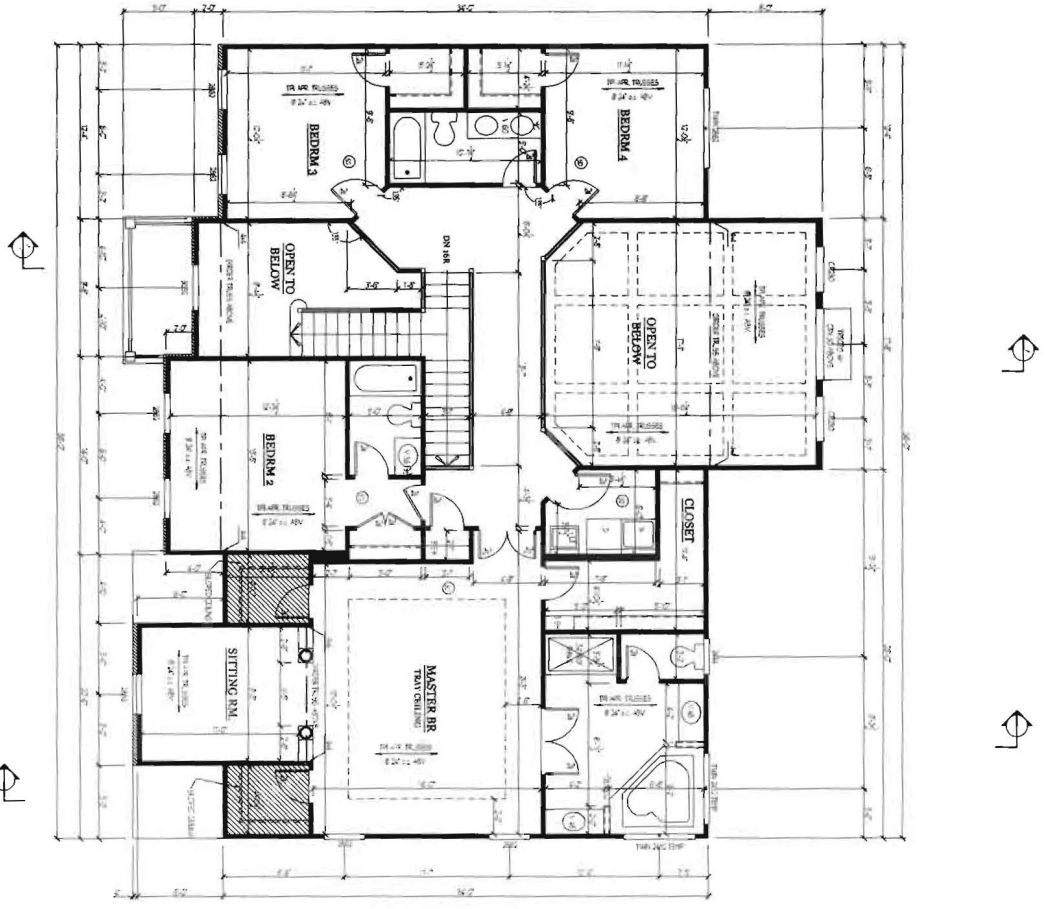
3

Project No.: C15.04  
 Date: 4/15  
 Scale: 1/4" = 1'-0"

Drawing: FIRST FLOOR PLAN  
 Project: CATONSVILLE HOMES  
 WHITEHALL  
 WOODBINE CROSSING LOT 13

Notes:

**Plymouth Road Architects**  
 640 Plymouth Road, Baltimore, MD 21229 - 410-788-0281  
 PlymouthRoadArchitects.com



FINAL SET 4/28/15

4

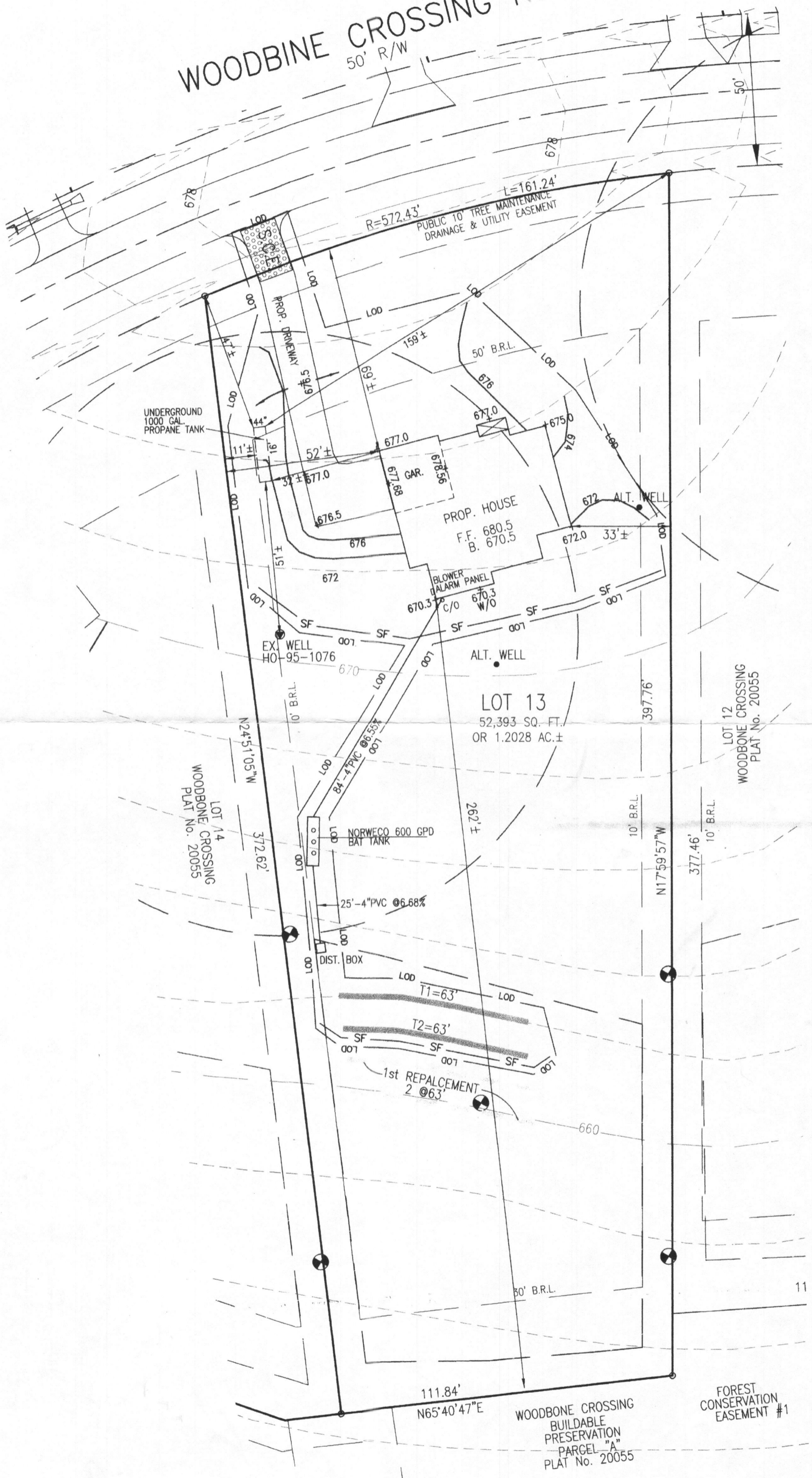
Project No.: C15.04  
 Date: 4/15  
 Scale: 1/4"=1'-0"

Drawing: SECOND FLOOR PLAN  
 Project: CATONSVILLE HOMES  
 WHITEHALL  
 WOODBINE CROSSING, LOT 13

Notes:

**Plymouth Road Architects**  
 640 Plymouth Road, Baltimore, MD 21229. 410-788-0281  
 PlymouthRoadArchitects.com

# WOODBINE CROSSING ROAD



LOT 13  
52,393 SQ. FT.  
OR 1.2028 AC.±

LOT 12  
WOODBINE CROSSING  
PLAT No. 20055

LOT 14  
WOODBINE CROSSING  
PLAT No. 20055

WOODBINE CROSSING  
BUILDABLE  
PRESERVATION  
PARCEL "A"  
PLAT No. 20055

FOREST  
CONSERVATION  
EASEMENT #1