



Health

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: _____

Permit No.: B8001115

Building Address: 1008 Thunderbird Dr.
City: Woodbine State: MD Zip Code: 21797
Suite/Apt. #: _____ SDP/WP/BA #: GP-18-35
Census Tract: _____ Subdivision: Fairlane Farm
Section: _____ Area: _____ Lot: 43
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Vacant lot
Proposed Use: Single family house
Estimated Construction Cost: \$ 230,000
Description of Work: New 2 story "Longwood" BLV 'K', with 2 car garage, and finished lower level (Rec room + Bathroom)
Occupant or Tenant: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: NVR Inc
Address: 9720 Patuxent Woods Drive
City: Columbia State: MD Zip Code: 21046
Phone: 410-379-5956 Fax: _____
Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Decatur Building Services
Address: PO Box 552
City: Woodbine State: MD Zip Code: 21797
Phone: 443-309-7792 Fax: _____
Email: Jim@DecaturbuildingServices.com

Contractor Company: NV Homes
Contact Person: Clint Gagle
Address: 9720 Patuxent Woods Drive
City: Columbia State: MD Zip Code: 21046
License No.: 56
Phone: 410-379-5956 Fax: _____
Email: CGagle@NVRInc.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"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	Depth Width
Gross area, sq. ft./floor:	1 st floor: <u>47</u> x <u>50</u>
Area of construction (sq. ft.):	2 nd floor: <u>39</u> x <u>50</u>
Use group:	Basement: <u>47</u> x <u>50</u>
Construction type:	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Wood Frame	No. of Bedrooms: <u>4</u>
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>
	No. of efficiency units:
	No. of 1 BR units:
	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
<u>Water Supply</u>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
<u>Sewage Disposal</u>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<u>Heating System</u>
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
<u>Sprinkler System:</u>
<input checked="" 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: Jim Kerwin
Email Address: Jim@DecaturbuildingServices.com
AGENT NV Homes
Title/Company

Print Name: Jim Kerwin
Date: 4/9/2018

RECEIVED

APR 09 2018

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	4/24/18	H. Q. S. [Signature]

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

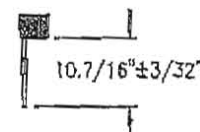
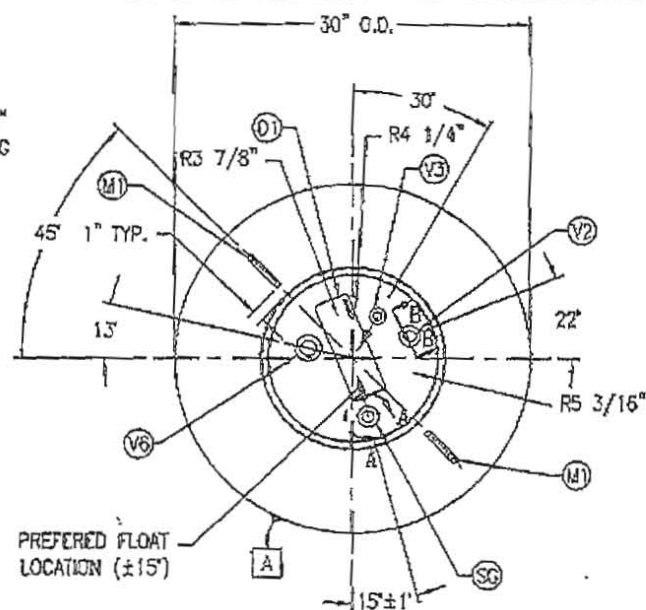
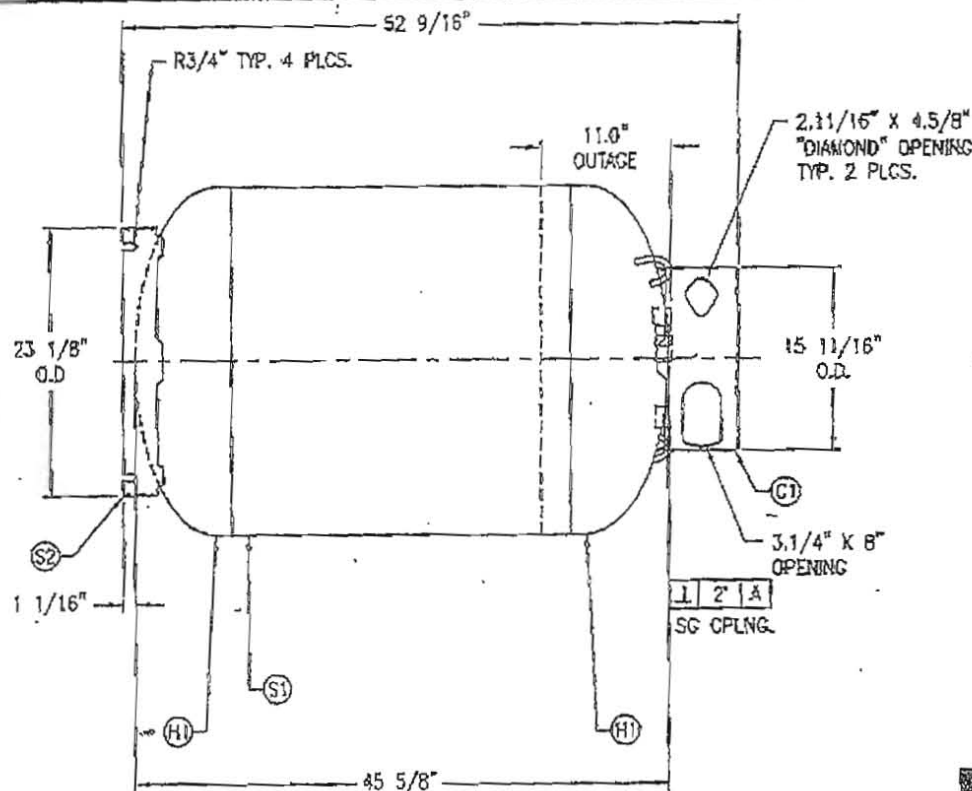
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$100.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$ 150.00
Balance Due	\$
Check	# 177095

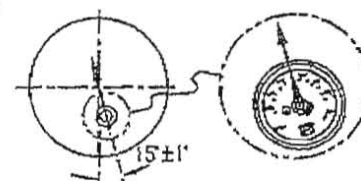
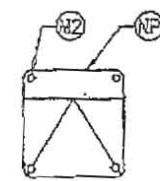
Distribution of Copies: White: Building Officials Green: PSZA, Zoning Yellow: PSZA, Engineering Pink: Health Gold: SHA

Operations\Updated Forms\Building appimp 8.2012.docx

(No grading yet)



DT DETAIL



DETAIL A

NOTES:

1. INSIDE OF THE TANK TO BE CLEAN, DRY & FREE OF RUST, SLAG & OTHER FOREIGN PARTICULATE MATTER.
2. FOR NON-CORROSIVE SERVICE.
3. SLEEVE & PROTECTIVE COVER (FOR TOP OF GUARD) TO BE PLT ON TANK AFTER PRODUCTION.
4. ATTACH NAMEPLATE TO GUARD WITH FOUR RIVETS. PRIMARY HEAD OF RIVETS LOCATED ON EXTERIOR OF GUARD.
5. INSTALL SIGHT GAUGE DIAL AS SHOWN IN DETAIL A.
6. SEE DT DETAIL FOR CORRECT LENGTH OF DIP TUBE.

SYM	DATE	BY	REVISION	APP	NOTES
B		TA		MR	C1042
N		TA		MR	C1043 C
O		MR		MR	C1046 D
P		TA		MR	C1045 A
Q		EGG		EGG	

SPECIFICATIONS			
O.D. 30	LGTH. 45.5/8	SH.	
WAMP 250	PSI @ 550 °F	HD.	
RY- MONT-20 TO 250 PSI		CAL. 120	S.A. 32.7
EXMT TEST PSI		WT. 2914	CU. FT. 18.1
XRAY		CORR ALW	SH HD
CRN L4886,5C		CODE: ASME SECTION VIII DIV. 1	
WELD DETAILS: M-1932		LATEST EDITION & ADDENDA	
STD. TOLERANCES (UNLESS OTHERWISE NOTED): M-2461			



420# ASME DOMESTIC
STORAGE TANK

DRAWN BY LC	DATE	SCALE: NONE
APP. BY JD	DATE	DRAWING NO. 6762

170475



Location Drawing

Scale: 1" = 100'

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. This plat is not to be relied upon for the establishment or location of fences, garages, buildings, dwellings or other existing or future improvements. The accuracy of measured distances is approximately ten feet. 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 securing financing or refinancing. The approximate location of the dwelling is shown in relation to the apparent property lines. The undersigned surveyor was in charge of preparing this plat.

7378 Mink Hollow Road
Howard County, Maryland

William F. Watters

9/9/15

Ruxton Design Corporation

9475 Deereco Road

Suite B200

Timonium, Maryland 21093

410-823-5000

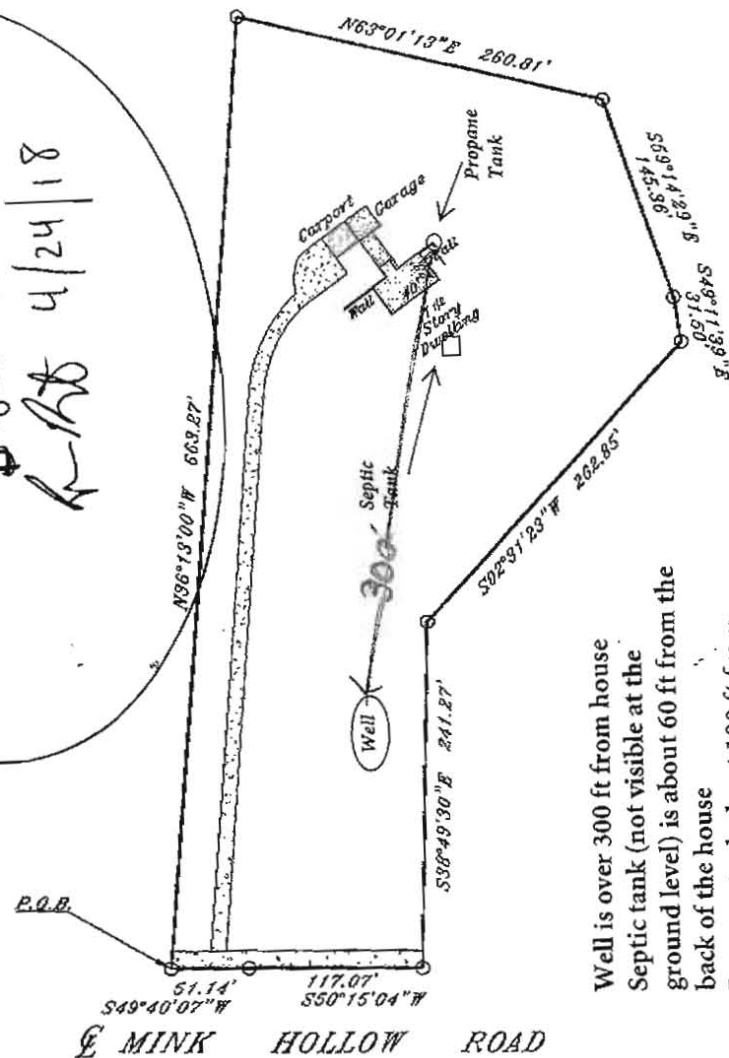
410-823-0115 fax

rdc@ruxtondesign.com

www.ruxtondesign.com

AT-54679

Well is Septic
Setbacks field verified
on 4/24/18
Approved for APT
B18001185
RHT 4/24/18





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: _____

Permit No.: B18001523

Building Address: 1008 Thunderbird Dr
City: Woodbine State: MD Zip Code: 21797
Suite/Apt. #: _____ SDP/WP/BA #: _____
Subdivision: Fairlane Farm
Lot: 43 Tax Map: 3 Parcel: 3

Existing Use: SFD
Proposed Use: SFD w/ Propane Tank
Estimated Construction Cost: \$ 8000
Description of Work: _____

install 1000 gallon in-ground propane tank

Occupant/Tenant Name: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: owner
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

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

Property Owner's Name: Daisy Coop LLC
Address: 2215 Duval Rd
City: Woodbine State: MD Zip Code: 21797
Phone: 410-963-4457 Fax: _____
Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: Michelle Clancy
Address: Po Box 310
City: Perry Hall State: MD Zip Code: 21281
Phone: 443-60-7514 Fax: _____
Email: Michelle@AppliedAndApproved.com

Contractor Company: TECH AIR
Contact Person: Dennis Feaga
Address: 1560 A-D Caton Center Dr
City: Baltimore State: MD Zip Code: 21227
License No.: 81215
Phone: 410-984-5631 Fax: _____
Email: _____

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

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

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Applicant's Signature: _____
Michelle Clancy
Email Address: Michelle@AppliedAndApproved.com
Permits
Title/Company: _____

Print Name: Michelle Clancy
Date: 5/3/18

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>5/15/18</u>	<u>R-LB</u>
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> 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>110.00</u>
Permit Fee	\$ _____
Tech Fee	\$ _____
Excise Tax	\$ _____
PSFS	\$ _____
Guaranty Fund	\$ _____
Add'l per Fee	\$ _____
Total Fees	\$ _____
Sub- Total Paid	\$ _____
Balance Due	\$ <u>6377</u>
Check	# _____

Distribution of Copies: White: Building Officials

Green: PSZA, Zoning

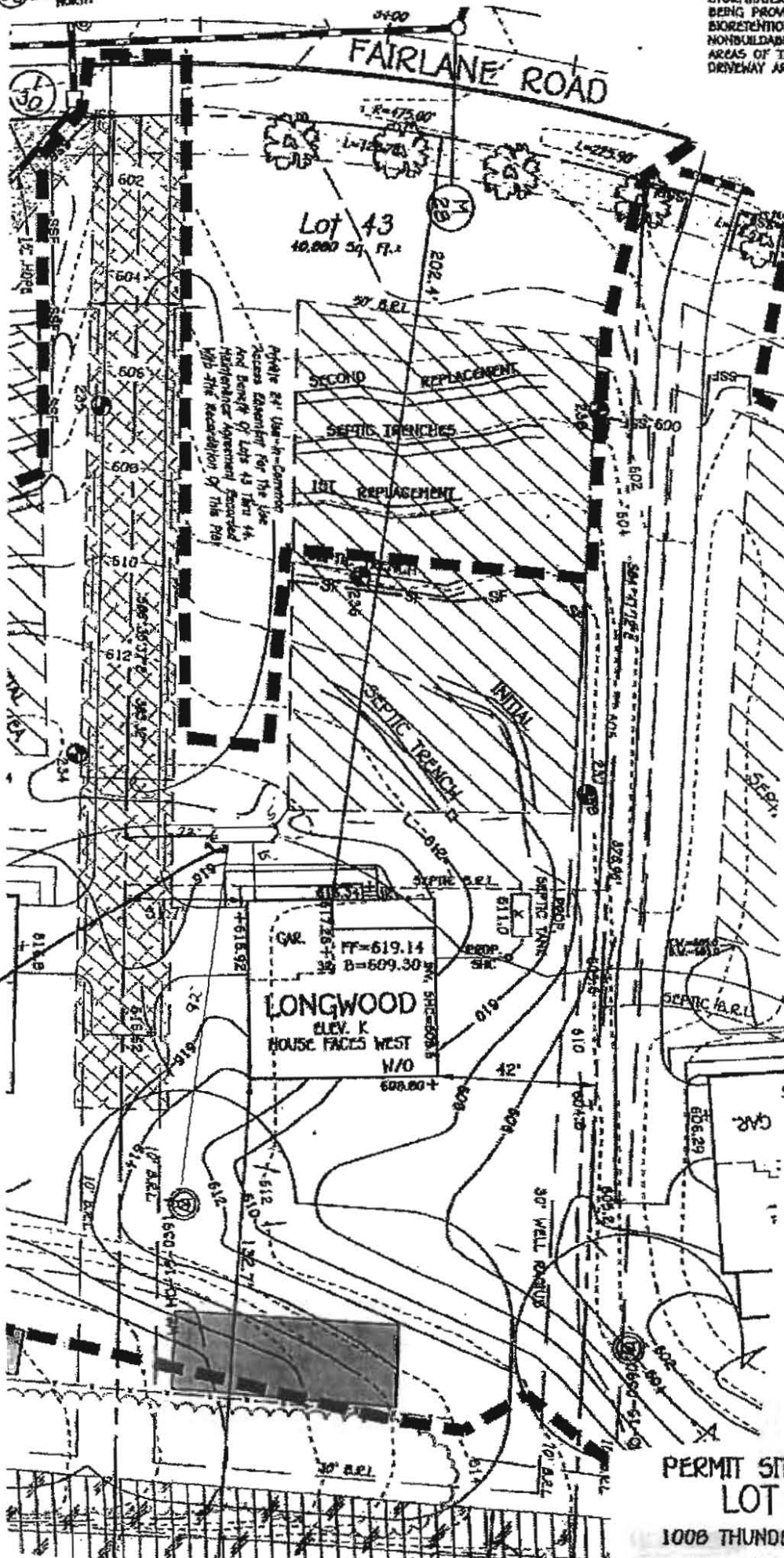
Yellow: PSZA, Engineering

Pink: Health

Gold: SHA

STORMWATER MANAGEMENT NOTES:

STORMWATER MANAGEMENT FOR LOT 43 IS BEING PROVIDED BY BMP NO. 4, A BIORETENTION FACILITY, LOCATED ON NONBUILDABLE PARCEL 'M', FOR THE ROOF AREAS OF THE PROPOSED HOUSE AND THE DRIVEWAY AREA.



Approved for UPT
B18001523
R/S 5/15/18

OWNER/DEVELOPER

BY HOME
9700 FAIRVIEW WOODS DRIVE
COLUMBIA, MD 21044
410-379-5556

PERMIT SITE PLAN LOT 43

100B THUNDERBIRD DRIVE
FAIRLANE FARMS

PHASE TWO
ZONED: RC-DEO

TAX MAP NO.: B GRID NO.: 2 PARCEL NO.: B
5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1"=40' DATE: MARCH 29, 2018
SHEET 1 OF 1

PLAN

SCALE: 1"=40'

NOTE: THE EXISTING WELL SHOWN ON THIS PLAN, HO-15-0391, HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.

FISHER, COLLINS & CARTER, INC.
Civil, Surveying, Construction & Land Surveyors

REGISTERED PROFESSIONAL ENGINEER - CIVIL ENGINEERING PERMIT NO. 11192 (01-1-2000)