

Building Address 12532 Woodridge Lane
Suite/Apt. #: --- SDP/WP/Petition #:
Census Tract _____ Subdivision GREENWOOD FARMS
Section 4 Area _____ Lot 31
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates _____ Lot Size _____

Property Owner's Name KATHY & BOB ADLER
Address 12532 WOODRIDGE LN.
City HIGHLAND State MD Zip Code 20777
Home Phone 301 854-2896 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated herein):

Phone _____ Fax _____

Existing Use _____
Proposed Use _____
Estimated Construction Cost \$ \$52,000.
Description of Work ENLARGE MASTER BR.,
REMODEL MASTER BATH & HALL
BATH
Occupant or Tenant KATHY & BOB ADLER
Contact Name KATHY & BOB ADLER
Address 12532 WOODRIDGE LN
City HIGHLAND State MD Zip Code 20777
Phone 301 854-2896 Fax _____

Contractor Company PETIT CONSTRUCTION, INC.
Contact Person C.B. PETIT, JR.
Address 7560 GREENWOOD DR.
City HIGHLAND State MD Zip Code 20777
License No. MHC 31911
Phone 301 854-2477 Fax _____
Engineer or Architect Company _____
Contact Person N/A
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics
Height: _____
No. of stories: _____
Gross area, sq. ft. per floor: _____
Use group: _____
Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities
Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads _____

Building Characteristics
SF Dwelling SF Townhouse
Depth 32' Width 58'
1st floor: _____
2nd floor: _____
Basement: SAME
Finished Basement Unfinished Basement Crawl
space Slab on Grade
No. of Bedrooms 4
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: _____
 State Certified Modular
 Manufactured Home

Utilities
Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other: _____

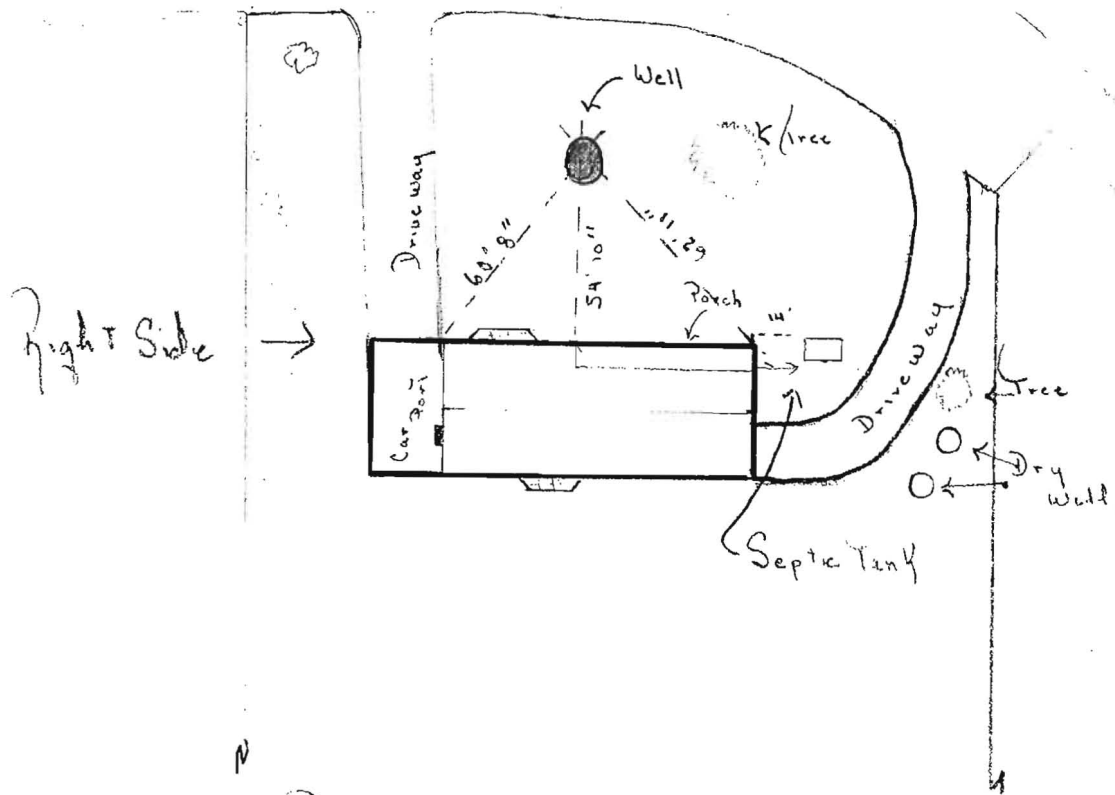
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

Applicant's Signature C.B. Petit, Jr.
Email Address PETIT.CONSTRUCT@AOL.COM
Title/Company OWNER / PETIT CONSTRUCTION INC.

Print Name C.B. A.T., Jr.
Date 4/20/10

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

AGENCY		DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	Filing fee	PROPERTY ID #
<input checked="" type="checkbox"/>	Land Development, DPZ			Front: _____	\$ <u>25.00</u>	
<input type="checkbox"/>	State Highways			Rear: _____	\$ _____	
<input checked="" type="checkbox"/>	Building Officials			Side: _____	Excise tax \$ _____	
<input checked="" type="checkbox"/>	Dev. Engineering, DPZ			Side/St.: _____	Add'l per fee \$ _____	
<input checked="" type="checkbox"/>	Health	<u>5-24-10</u>	<u>Approved D Bernard as shown</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____	
<input type="checkbox"/>	Fire Protection				Sub-total paid \$ _____	
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		Is Entrance Permit Required? YES <input type="checkbox"/> NO <input type="checkbox"/>		Balance due \$ _____		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>		Check # <u>6146</u>		
ONE STOP SHOP: <input type="checkbox"/>		Lot Coverage for New Town Zone _____		Validation # _____		
		SDP/Red-line approval date _____		Accepted by _____		



Well located 60' 8" from right side.

62' 11" from left side.

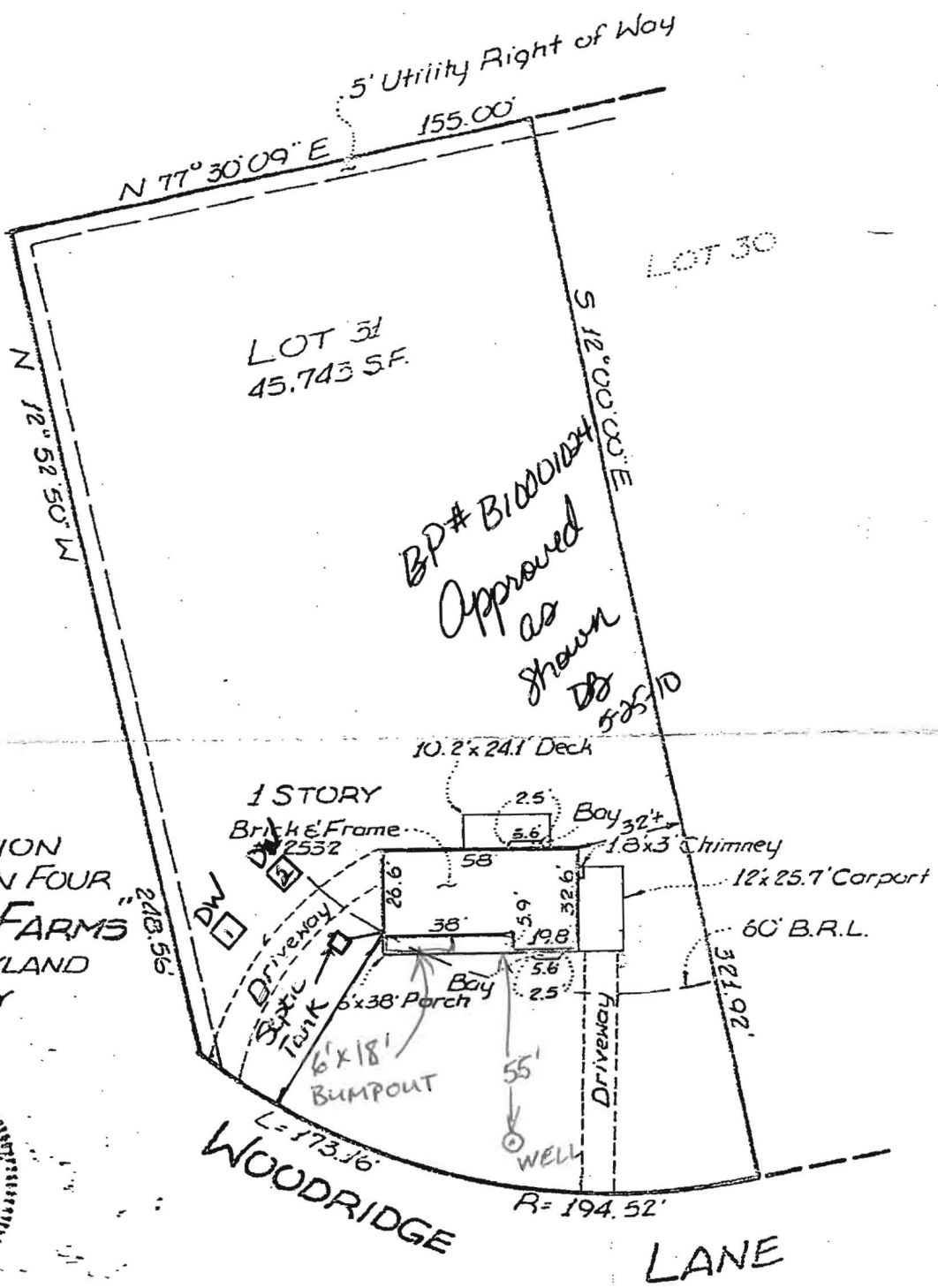
54' 10" from corner of porch
at front door.

12" Cinder block with steel plate
cover.

Septic tank - 1' out from left of house and
12' out to drive way. Dry well shown
from septic tank approximate location.

NOTE: This survey for title purposes only — not to be used for determining property lines. Property corner Markers Not guaranteed by this survey.

Fr 2000

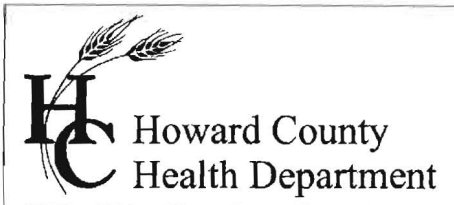


HOUSE LOCATION
 LOT 31 SECTION FOUR
 "GREENWOOD FARMS"
 HIGHLAND, MARYLAND
 HOWARD COUNTY



CERTIFICATE I HEREBY CERTIFY THAT THE POSITION OF ALL THE EXISTING IMPROVEMENTS ON THE ABOVE DESCRIBED PROPERTY HAS BEEN CAREFULLY ESTABLISHED BY A TRANSIT - TAPE SURVEY. <i>Thomas W. Mauk</i> THOMAS W. MAUK MARYLAND P.L.S. NO. 145	REFERENCES PLAT BK. 7 PLAT NO. 3	B & S Associates LAND SURVEYOR / ENGINEERING CONSULTANT LAND PLANNING CONSULTANT (301) 972-3345 P.O. BOX 348 GERMANTOWN, MARYLAND 20877	
	LIBER FOLIO	DATE OF SURVEYS WALL CHECK: HSE. LCC.: 16 Aug. 60 BOUNDARY:	SCALE: 1" = 50' DRAWN BY: TW JOB NO.: B1080

NOTE: B.R.L. information if shown, obtained from M.N.C.P.P.C.



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

May 12, 2010

**RE: Building Permit # B10001024
12532 Woodridge Lane
Building Site Plan**

Mr. and Mrs. Adler:

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

- Plan should be drawn to a reasonable scale between 1:30 and 1:100 and noted on plan.
- Show the exact location of existing structures, wells, septic easements, septic reserve areas, and other septic system components such as septic tank, dry wells and distribution boxes.

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 L. Bernard

Dana L. Bernard, Sanitarian

Bureau of Environmental Health

Well and Septic Program

Phone (410) 313-2775

E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file
Petit Construction, Inc.