

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER

D06007243

Building Address 17071 Windsor Mass
Ellicott City MD 21042
Suite/Apt. #: _____ SDP/WP/Petition #: 03-30
Census Tract 60300 Subdivision Ellicott Meadows
Section _____ Area _____ Lot 21
Tax Map 11 Parcel _____ Grid 16
Zoning RC-20 Map Coordinates _____ Lot size _____

Property Owner's Name NVR INC / Ryan
Address 6055 Marshlee Drive
City Ellicott City State MD Zip Code 21075
Home Phone _____ Work Phone 410-796-0980
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax 410-796-7094

Existing Use Town Home under construction
Proposed Use SFA
Estimated Construction Cost \$ 10,000
Description of Work 18x10 Deck

Contractor Company NVR INC / Ryan Homes
Contact Person Alan Bennett
Address 7601 Leesville Rd
City McLean State VA Zip Code 22112
License No. MH60 #50
Phone 410-796-0980 Fax _____

Occupant or Tenant _____
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company _____
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
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 _____ Structural Steel _____ Masonry _____ Wood Frame _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

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

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 Alan Bennett
Title/Company CCM

Print Name Alan Bennett
Date 11-2-06

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>100.00</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health <u>11/17/06</u>		<u>[Signature]</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>330,000</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies: _____	White: Building Official	Green: LDD, DPZ	Lot Coverage for NewTown Zone _____	
Yellow: DED, DPZ	Pink: Health	Gold: SHA	SDP/Red-line approval date _____	Accepted by <u>[Signature]</u>

view of clubhouse plan

Proposed Community Pool, Pavilion
Applied for within one (1) year
Development Engineering Division's
letter.

- NOTES:
- 1.) Refer to Sheets 16 thru 19 for Storm Drain Profiles.
 - 2.) Refer to Sheets 6 & 11 for Curb Details.
 - 3.) All offsets along Frederick Road are from the Existing ϕ Road.
 - 4.) Locations of Storm Drain Structures are Presented within the Structure Schedule Sheet 18.
 - 5.) For ϕ Road Curve Data, See Sheet 6.
 - 6.) For Standard SDP Legend See Sheet 1.

- 7.) All Paving is P-2 with the exception of Frederick Road Widening. See
- 8.) Min. Driveway width for attached units which share driveways = 14
- 9.) ϕ of all swales to be located 15' from unit "box".
- 10.) I-5 and I-30 may require adjustment. As field location of MA 24 line may be less than 25'. There shall be 25' min. between MA 24
- 11.) See Sheet 21 for Md. Rte 144 Widening details.
- 12.) Refer to Sheet 21 for MSHA Type "A" curb detail.

MATCHLINE SHEET 5

