
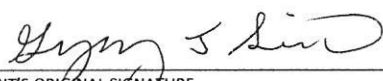


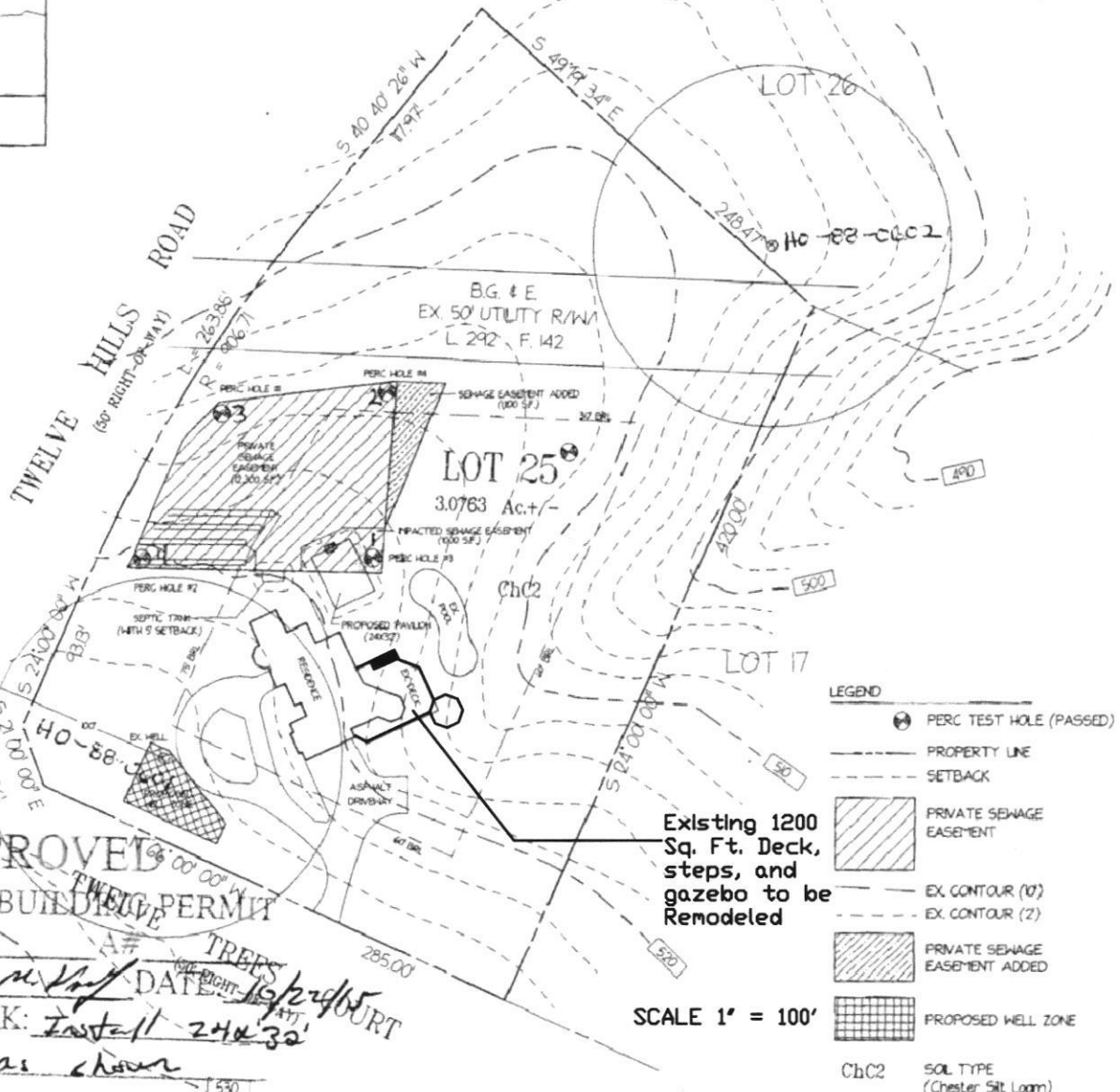
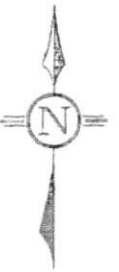
PERMIT NUMBER: B 21003016

DATE ACCEPTED:

 <b>RESIDENTIAL BUILDING PERMIT APPLICATION</b> HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS 3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4 <a href="http://www.howardcountymd.gov">www.howardcountymd.gov</a>					
<b>BUILDING SITE ADDRESS REQUIRED</b>					
Street Address: 13003 Twelve Trees Court					Unit:
City: Clarksville			State: MD		Zip Code: 21029
Subdivision/Village/Complex Name: Twelve Hills				SDP/WP/BA #:	
Lot:	Tax Map: 0028	Parcel: 0381	Grading Permit #:		
<b>DESCRIPTION OF WORK REQUIRED</b>					
Existing Use: Single Family		Proposed Use:		Estimated Cost: \$ 11,000	
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None					
Remodel existing deck, steps, and gazebo with new deck boards and new railings. (1200 sq ft)					
<b>PROPERTY OWNER INFORMATION REQUIRED</b>					
Owner(s) Name(s) (As it appears on tax records): Toptan Lala					Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: 13003 Twelve trees court					
City: Clarksville			State: MD		Zip Code: 21029
Phone: 443-745-1665		Email:			
<b>APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION</b>					
Business Name: Rhine Landscaping			Contact Name: Greg Simon		
Street Address: 12885 old frederick road					
City: Sykesville			State: MD		Zip Code: 21784
Phone: 410-442-2445		Email: greg@rhinelandscaping.com			
<b>CONTRACTOR INFORMATION REQUIRED</b>					
Business Name: Rhine Landscaping					
Licensee's Name: Jay Rhine			License #: MHIC: 121739		
Street Address: 12885 old frederick road					
City: Sykesville			State: MD		Zip Code: 21784
Phone: 410-442-2445		Email: greg@rhinelandscaping.com			
<b>ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE</b>					
Business Name:			Name:		
Street Address:					
City:			State:		Zip Code:
Phone:		Email:			
AUG 12 2021 LICENSES & PERMITS DIVISION					
<b>BUILDING CHARACTERISTICS REQUIRED</b>					
Primary Structure: <input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> SF Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling (MF*)					Condo: <input type="checkbox"/> Yes <input type="checkbox"/> No
Utilities: <input type="checkbox"/> Electric <input type="checkbox"/> Gas		Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Well)		Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Septic)	
Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other:				Roadside Tree Project: <input type="checkbox"/> No <input type="checkbox"/> Yes: #	
Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input type="checkbox"/> None			Fire Alarm System: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac		
<b>ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)</b>					
Model Name & Options:					
# of Bedrooms (SF):	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):	
# Rooms:	# Full Baths:	# Half Baths:	# Fireplaces:		
Garage/Carport Info: <input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input type="checkbox"/> None					
Basement/Foundation Info: <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Post & Pier <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Finished Basement: <input type="checkbox"/> Full or <input type="checkbox"/> Partial					
1st Fl Width:	1st Fl Depth:	2nd Fl Width:	2nd Fl Depth:	Bsmt Width:	Bsmt Depth:
Energy Method: <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI		Gross Area: sq ft		Occupiable Area: sq ft	
<b>AGREEMENT/ DISCALIMER REQUIRED</b>					
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 ORIGINAL SIGNATURE			8/11/2021 DATE SIGNED		
<b>FOR OFFICE USE ONLY</b>					
CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY					
AGENCIES REQUIRED/APPROVALS:					
<input checked="" type="checkbox"/> PR	<input checked="" type="checkbox"/> DPZ	<input checked="" type="checkbox"/> DED	<input checked="" type="checkbox"/> Health 8/19/21	<input type="checkbox"/> SHA	<input type="checkbox"/> CID
SUBMITTAL FEES: 55.00		PAYMENT: NO check		ACCEPTED BY: MP	



THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF AT LEAST 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A REVISED SEWAGE EASEMENT SHALL NOT BE NECESSARY.



APPROVED  
WALK-THRU BUILDING PERMIT  
BP#  
APP. SAN  
DESC. OF WORK: *Install 24x32' pavilion as shown*  
DATE: *10/20/15*  
TWO RIGHT-OF-WAY  
TWO TREES  
COURT

- NOTES
- ALL EXISTING WELLS ON THE SUBJECT PROPERTY AND WITHIN 100 FEET OF THE SUBJECT PROPERTY BOUNDARIES ARE REPRESENTED TO THE BEST OF MY KNOWLEDGE AND BELIEF.
  - TOPOGRAPHY IS FROM SURVEY CONDUCTED BY MILDENBURG, BOENDER & ASSOCIATES, AND PRESENTED ON THIS PLAT SUBMITTED AS PLOT PLAN FOR CONSTRUCTION OF THE RESIDENCE IN 1984. THE TOPOGRAPHY PRESENTED ON THIS PLAN ACCURATELY REPRESENTS THE RELATIVE ELEVATION CHANGES ON AND NEAR THE SUBJECT PROPERTY.
  - THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT.
  - THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT #8549. REFER TO PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS, ANY RESTRICTIONS, AND PROVISIONS.

#### PURPOSE STATEMENT

PRIVATE SEWAGE EASEMENT ADJUSTMENT TO ACCOMMODATE A PROPOSED PAVILION. THE PAVILION IS PROPOSED ADJACENT TO THE RESIDENCE AND THE EXISTING POOL.

## PERCOLATION CERTIFICATION PLAN

DATE: October 8, 2015 SCALE: 1" = 100' - 0" A# 38578

PLAN PREPARED BY:  
KENNETH E. WAGESTER, RLA  
LANDSCAPE ARCHITECT

#### PROPERTY IDENTIFICATION

1003 TWELVE TREES COURT  
CLARKSVILLE, MD 2029  
LOT 25, TWELVE HILLS  
SECTION 3, TAX MAP 20, PARCEL 381

NOTE: ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.

AS I HAVE EDITED THE ORIGINAL PLOT PLAN PREPARED BY MILDENBURG, BOENDER & ASSOCIATES, I CERTIFY THAT THE ADDITIONAL INFORMATION SHOWN HEREON IS BASED ON WORK PERFORMED IN MY PRESENCE OR BY MY DIRECTION, AND IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

*Kenneth E. Wagster*  
LANDSCAPE ARCHITECT  
10/20/15

APPROVED FOR PRIVATE WATER & PRIVATE SEWERAGE SYSTEMS  
HOWARD COUNTY HEALTH DEPARTMENT

*B. Wagon for Melissa Roegner*  
MR (SIGNATURE) 10/20/15

OWNER: TOPE & MELISSA LALA  
1003 TWELVE TREES COURT  
CLARKSVILLE, MD 2029  
(410) 707 - 3189

# RHINE

LANDSCAPING, LLC

MHIC # 121739  
12885 Old Frederick Road, Sykesville, MD  
410-442-2445 www.rhinelandscaping.com