

Approved 11.9.22
-H.O.

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Alteration/SFD	B22004185	11/09/2022

Description of Work
SFD/ Install one 4' x 12' exterior set of steps using concrete block and poured concrete for steps. Create opening in existing foundation to accommodate one prehung door.**MORE THAN 4 STEPS, HANDRAIL IS REQUIRED

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
7107	BROOKSHIRE	LN	
Unit Type	Unit #	X Coordinate	Y Coordinate
--Select--		-76.93309	39.17544
City	State	Zip Code	Primary
CLARKSVILLE	MD	21029	Yes

Parcel * (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
850316	475	40000	269500	794400	524900	RURAL
Legal Description						
IMPSLOT 15 40,000 SQ[]7107 BROOKSHIRE LN[]ASHLEIGH KNOLLS PHASE 1						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	15	605102	4				
Plan Area	State Tax Id		Subdivision Name				
	1405416132						
Section	Area		Tax Map				
			41				
Grid	Zoning District		ADC Map				
41-7	RR-DEO		5052-A2				
SDP No.	Final Plan No.		WP File No.				
Record Plat No.	WS Contract No.		FDP No.		Primary		
11120					Yes		
Owner Occupied	Year Built		Historic District				
<input type="radio"/> Yes <input type="radio"/> No	1995		<input type="radio"/> Yes <input checked="" type="radio"/> No				
Historic District Registry No.	Stat Area		Flood Plain				
	5-15A		<input type="radio"/> Yes <input checked="" type="radio"/> No				
Building No							

Owner (This section is not required.)

Search Reset Clear

Name *
COLEY NATHANIEL J JR

Address Line 1
7107 Brookshire lane

Address Line 2

Address Line 3

Mail City	Mail State	Mail Zip Code
Clarksville	Md	21029
Phone	Primary	
4102922301	Yes	

E-mail

Cell Number Fax Number

Professionals (This section is not required.)

Search Reset Clear

License # * 08010041139 Business Name CONSTRUCTION INTEGRATION GROUP LLC

License Type * MHIC Ind First Name MICHAEL Middle Name Last Name CROSBY

Primary Yes Address Line 1 6400 BALTIMORE NATIONAL PKE #419 Address Line 2

City CATONSVILLE State MD ZIP Code 21228-0000

Phone 1 4107818507 Phone 2 Fax 4432033150

E-mail MIKECROSBYJR@GMAIL.COM

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type * Applicant First Name Michael MI Last Name Crosby

Relationship --Select-- Full Name Michael Crosby

Primary No Organization Name Cig construction integration group

Street Address 6400 Baltimore national pike Address Line 2

City Catonsville State MD Zip Code 21228

Phone 410-781-8507 Cell Fax

E-mail * Cigenterprisemd@gmail.com

Contact (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type Contact First Name Michael MI Last Name Crosby

Relationship Licensed Professional Full Name Michael Crosby

Primary Yes Organization Name Cig construction integration group

Street Address 6400 Baltimore national pike Address Line 2

City Catonsville State MD Zip Code 21228

Phone 410-781-8507 Cell Fax

E-mail Cigenterprisemd@gmail.com

Addtl Info

Est Construction Cost * 10000 Housing Units * 0 Number of Buildings * 0 Public Owned No

Construction Type --Select--

RESIDENTIAL ALTERATION INFO

RESIDENTIAL ALTERATION INFORMATION

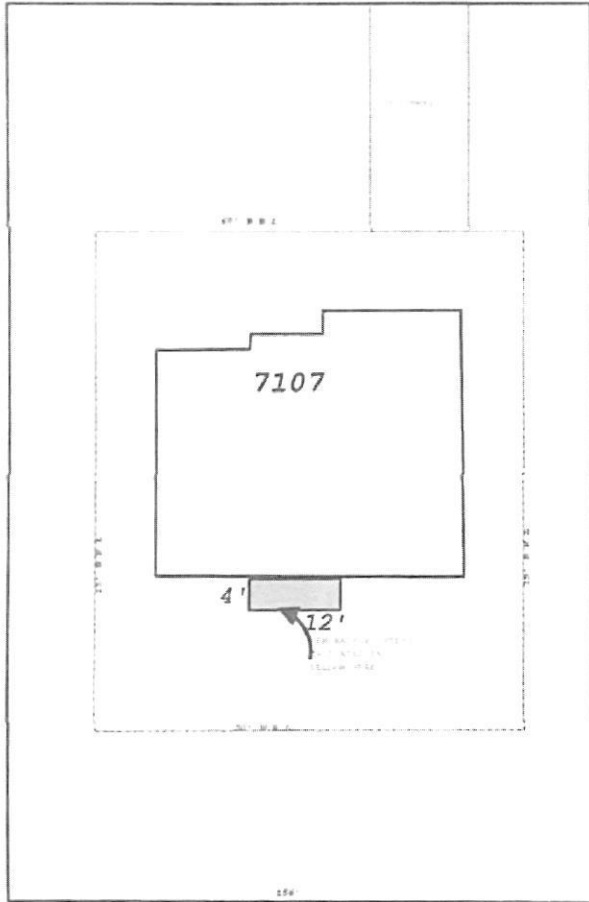
Total Square Footage *	No of Stories *	Basement	Bedrooms	Full Baths	Half Baths	Water *	Sewage *
48	2	--Select--				Private	Private
Existing Utilities *	Existing Heating System *	Existing Sprinkler System *	Type of New Fireplace	Expiration Date	Fee Exempt *		
Electric	Electric	None	--Select--	5/8/2023	<input type="radio"/> Yes <input checked="" type="radio"/> No		

PAYMENT INFORMATION

Check 1	Payee 1	Check 2	Payee 2	SAP Doc No	SAP Entered

Submit Cancel

BROOKSHIRE LANE



Site:	1707 BROOKSHIRE LANE	Drawing:	1	Project:	7402	Drawn:	Builder	Notes:		CIG Enterprises, LLC
Title:	Plot plan	Scale:	1/16"=1'0"	Date:	11/1/2022	Rev:	A			410-781-8507

10/14/94
V. NEON

05-466132

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50323

A 41371

DISTRICT 5th

INDEXED

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

DATE _____
DATE SYSTEM APPROVED 10/14/94

INSPECTOR C. B.

VanSant Plumbing & Heating IS PERMITTED TO INSTALL ALTER

ADDRESS 3 North Avenue, Mt. Airy, Maryland 21771 PHONE 795-6566

SUBDIVISION Ashleigh Knolls, Sec. 1 LOT 15 ROAD 7107 Brookshire Lane

PROPERTY OWNER Winchester Homes, Inc. Thomas

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 3 feet wide. Inlet 3½ feet below original grade. Bottom maximum depth 5½ feet below original grade. Effective area begins at 3½ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION ---Place distribution box 125 feet from the front lot line and 85 feet from the left lot line. Run trenches along contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 5/20/94 DKS

PLANS APPROVED BY C. Williams DATE 03/15/94

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

A 41371