

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER

806005944

Building Address 15917 Willis Way  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_  
Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 29  
Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_  
Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name Toll Bros  
Address 7104 Columbia Gateway Dr  
City Columbia State MD Zip Code 21046  
Home Phone 4109913932 Work Phone \_\_\_\_\_  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use SFD  
Proposed Use SFD  
Estimated Construction Cost \$ 12,000  
Description of Work Deck 24x20  
w steps to grade

Contractor Company TERRADIN DECKING  
Contact Person RAY TAVENNER  
Address 401 CREST LN  
City WESTMINSTER State MD Zip Code 21157  
License No. 62178  
Phone 4109913932 Fax \_\_\_\_\_

Occupant or Tenant TOLL BROS  
Contact Name RAY TAVENNER  
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:   |  |
| No. of stories:                |  | Public  |  |
| Gross area, sq. ft. per floor: |  | Private   |  |
| Use group:                     |  | Sewage Disposal:  |  |
| Construction type:             |  | Public  |  |
| Reinforced Concrete            |  | Private   |  |
| Structural Steel               |  | Electric Yes <input type="checkbox"/> No <input type="checkbox"/> |  |
| Masonry                        |  | Gas Yes <input type="checkbox"/> No <input type="checkbox"/>      |  |
| Wood Frame                     |  | Heating System:   |  |
| State Certified Modular        |  | Electric <input type="checkbox"/> Oil <input type="checkbox"/>    |  |
|                                |  | Natural Gas <input type="checkbox"/>                              |  |
|                                |  | Propane Gas <input type="checkbox"/>                              |  |
|                                |  | 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"/>              |       | Water Supply:   |  |
| Depth   | Width | Public  |  |
| 1st floor:  |       | Private   |  |
| 2nd floor:  |       | Sewage Disposal:  |  |
| Basement:   |       | Public  |  |
| Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> |       | Private   |  |
| Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>             |       | Electric Yes <input type="checkbox"/> No <input type="checkbox"/> |  |
| No. of Bedrooms   |       | Gas Yes <input type="checkbox"/> No <input type="checkbox"/>      |  |
| Height:   |       | Heating System:   |  |
| Multi-family dwellings:   |       | Electric <input type="checkbox"/> Oil <input type="checkbox"/>    |  |
| No. of efficiency units:  |       | Natural Gas <input type="checkbox"/>                              |  |
| No. of 1 BR units:  |       | Propane Gas <input type="checkbox"/>                              |  |
| No. of 2 BR units:  |       | Sprinkler system: N/A <input type="checkbox"/>                    |  |
| No. of 3 BR units:  |       | NFPA #13D   |  |
| Other Structure:  |       | NFPA #13R   |  |
| Dimensions:   |       | Other:  |  |
| 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.

Kauffman  
Applicant's Signature  
OWNER  
Title/Company

RAY TAVENNER  
Print Name  
10/12/06  
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*

- FOR OFFICE USE ONLY -

| AGENCY                | DATE            | SIGNATURE APPROVAL |
|-----------------------|-----------------|--------------------|
| Land Development, DPZ |                 |                    |
| State Highways        |                 |                    |
| Building Official     |                 |                    |
| Dev. Engineering, DPZ |                 |                    |
| Health                | <u>10/12/06</u> | <u>[Signature]</u> |
| Fire Protection       |                 |                    |

Is Sediment Control approval required prior to issuance?

YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐

ONE STOP SHOP: ☐

Distribution of Copies-  
T:\forms\PERMIT.FRM

White: Building Official

Green: LDD, DPZ

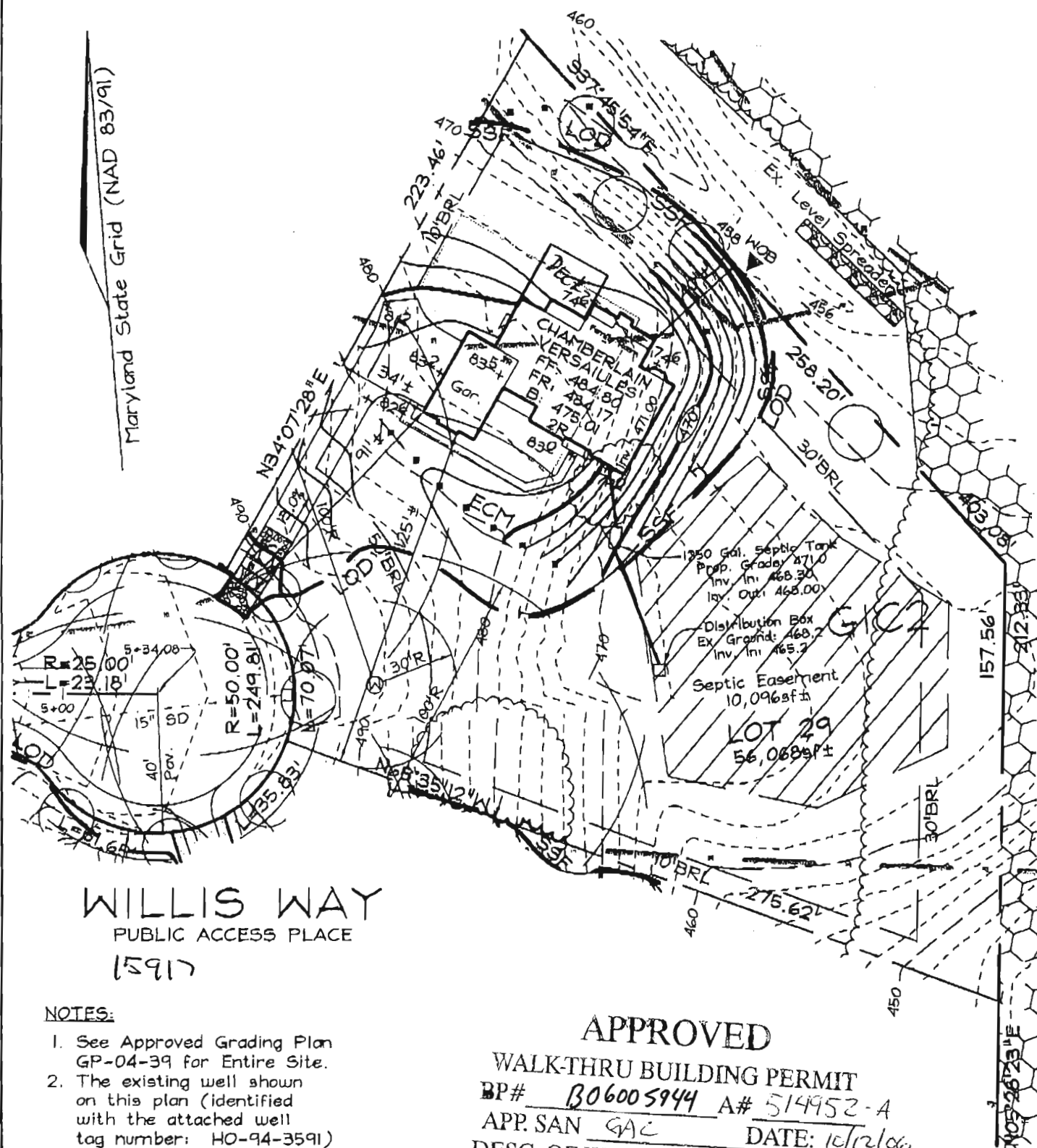
Yellow: DED, DPZ

Pink: Health

Gold: SHA

| DPZ SETBACK INFORMATION                                  |                | PROPERTY ID# |
|--|----------------|--------------|
| Front:   | Filing fee     | \$           |
| Rear:  | Permit fee     | \$           |
| Side:  | Excise tax     | \$           |
| Side St.:  | Add'l per. fee | \$           |
| All minimum setbacks met?                                | TOTAL FEES     | \$           |
| YES <input type="checkbox"/> NO <input type="checkbox"/> | Sub-total paid | \$           |
| Is Entrance Permit required?                             | Balance due    | \$           |
| YES <input type="checkbox"/> NO <input type="checkbox"/> | Check          | #            |
| Historic District?                                       | Validation     | #            |
| YES <input type="checkbox"/> NO <input type="checkbox"/> |                |              |
| Lot Coverage for NewTown Zone                            |                |              |
| SDP/Red-line approval date                               |                |              |

Accepted by \_\_\_\_\_



**WILLIS WAY**  
PUBLIC ACCESS PLACE  
15917

#### NOTES:

1. See Approved Grading Plan GP-04-39 for Entire Site.
2. The existing well shown on this plan (identified with the attached well tag number: HO-94-3591) has been field located by FSH Associates, professional surveyor, and is accurately shown.
3. Topography within LOD has been field run by FSH Associates on Aug. 17, 2005, remaining Topography is taken from Road Construction Plan F-03-122

## FSH Associates

Engineers Planners Surveyors  
8318 Forrest Street Ellicott City, MD 21043  
Tel: 410-750-2251 Fax: 410-750-7350  
E-mail: info@fsha.biz

### APPROVED

WALK-THRU BUILDING PERMIT  
BP# B06005944 A# 514952-A  
APP. SAN GAC DATE: 10/12/06  
DESC. OF WORK: DECK 24X20  
as shown

### OWNER/DEVELOPER

Toll MD II, LP  
7164 Columbia Gateway Drive  
Suite 230  
Columbia, Maryland 21046  
410.872.9185

DESIGN BY: PS

DRAWN BY: MY

CHECKED BY: ZYF

SCALE: 1"=50'

DATE: Aug 22, 2005

W.O. No.: 3217

SHEET No.: 1 OF 1

**LOT RESITE**

**LOT 29**

**CATTAIL TRACE**

TAX MAPS 13, 14, 20 & 21  
GRIDS 7, 12, 19 & 24  
4TH ELECTION DISTRICT

PARCELS 20, 67 & 312  
HOWARD COUNTY, MARYLAND

GP-04-39