

4/27/26. Spoke to Bruce Harvey. Eagles to pump out holding tank. -H.O.

Record Detail * (This section is required.)

Permit Type: Building/Residential/Misc/Temp Trailer
 Permit Number: B26001321
 Opened Date: 04/27/2026

Description of Work
 CASCADE RIDGE / TEMPORARY SALES TRAILER W/GENERATOR TO BE INSTALLED 5/22/26-11/22/26**
 HANDICAP RAMP TO TRAILER, supplied by Trailer Company

Online BP.
 g 4/29/26

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

No record was found.

Street #: 7343
 Street Name: GREEN DRAKE
 Street Type: RD
 Unit Type: --Select--
 City: ELKRIDGE
 State: MD
 Zip Code: 21075
 Primary: 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
11062951	0474	0	0	0	0	ELKRIDGE

Legal Description

[check spelling](#)

Block: 11, Lot: 2, Census Tract: 601101, Council Dist: 1, Inspection Dist: 6, Supervisor Dist: , Map #: , DAP Zone:

Plan Area: State Tax Id, Subdivision Name: Cascade Ridge

Section: Area, Tax Map: 31

Grid: 31-11, Zoning District: R-ED, ADC Map: 4936-H3

SDP No.: SDP-25-052, Final Plan No.: ECP-19-051, WP File No.:

Record Plat No.: 26923-2692, WS Contract No., FDP No., Primary: Yes

Owner Occupied: Yes No, Year Built: , Historic District: Yes No

Historic District Registry No.: , Stat Area: 1-01, Flood Plain: Yes No

Building No:

Owner * (This section is required.)

Search Reset Clear

Name *
 WILLIA

Address Line 1

5485 Harpers Farm Road # 200

Address Line 2

Address Line 3

Mail City

Columbia

Mail State

MD

Mail Zip Code

21044

Phone

410-997-8800

Primary

Yes

E-mail

chriswine@williamsburgllc.com

Cell Number

Fax Number

Professionals (This section is not required.)

License # *

155

Business Name

WILLIAMSBURG GROUP LLC

License Type *

Home Bldr

First Name

BRUCE

Middle Name

Last Name

HARVEY

Primary

Yes

Address Line 1

5485 HARPERS FARM ROAD SUITE 200

Address Line 2

City

COLUMBIA

State

MD

ZIP Code

21044

Phone 1

4109978800

Phone 2

Fax

4109974358

E-mail

BRUCEHARVEY@WILLIAMSBURGLLC.COM

Applicant (This section is not required.)

Search

As Owner

As Lic. Prof

As Contact

Type *

Applicant

First Name

Christine

MI

M

Last Name

Wine

Relationship

--Select--

Full Name

Christine M Wine

Primary

Yes

Organization Name

Williamsburg Group LLC

Street Address

5485 Harpers Farm Road, Suite 200

Address Line 2

City

Columbia

State

MD

Zip Code

21044

Phone

4109978800

Cell

Fax

E-mail *

chriswine@williamsburgllc.com

Addtl Info

Est Construction Cost *

50000

Housing Units *

0

Number of Buildings *

0

Public Owned

No

Construction Type

--Select--

TEMP TRAILER INFORMATION

TEMP TRAILER INFORMATION

Capital Project-No Fee *	Capital Project Number	Fee Exempt *	Water Supply *	Sewage Disposal *
<input type="radio"/> Yes <input type="radio"/> No	(Text)	<input type="radio"/> Yes <input type="radio"/> No	Private	Private
Roadside Tree Project Permit *	Roadside Tree Project Permit #	Number of Trailers *	Expiration Date	
<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="text"/>	(Text) 1	(Number) 10/25/2026	<input type="text"/>

Submit Cancel