

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
B10003605

Building Address 11259 Thepachence Lby
Elicott City, MD 21042
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision Howwood Crossing
Section _____ Area _____ Lot 56
Tax Map 29 Parcel 28 Grid 9
Zoning _____ Map Coordinates _____ Lot size 1.187A

Property Owner's Name Toll MD III LP
Address 7104 Columbia Gateway Dr #230
City Columbia State MD Zip Code 21046
Phone 410 992 5978 Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use Vacant lot
Proposed Use Residential Home
Estimated Construction Cost \$ 452,000
Description of Work Hardy Colonial, 4Bdrm
4 1/2 bdrms, gun-sites, Maple section
3-car garage, Full back.

Contractor Company Toll MD III LP
Contact Person Nathan Brandling
Address 7104 Columbia Gateway Dr #230
City Columbia State MD Zip Code 21046
License No. _____
Phone 410 992 5978 Fax _____

Occupant or Tenant Toll MD III LP
Contact Name Nathan Brandling
Address 7104 Columbia Gateway Dr #230
City Columbia State MD Zip Code 21046
Phone 410 992 5978 Fax 410 992 3234

Engineer or Architect Company ESE
Contact Person Mike Boyce
Address 7104 Columbia Gateway Dr #230
City Columbia State MD Zip Code 21046
Phone 410 365 4175 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
1st floor: <u>75'2"</u> <u>92'</u>	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
2nd floor: <u>65'</u> <u>88'</u>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: <u>75'2"</u> <u>82'</u>	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"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
No. of Bedrooms <u>2</u>	
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 <input type="checkbox"/>	
Manufactured Home <input type="checkbox"/>	

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 Nathan Brandling
Title/Company _____

Print Name Nathan Brandling
Date _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health <u>2-14-13</u>		<u>DPZ</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 # _____
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 Yellow: DED, DPZ Pink: Health Gold: SHA			Lot Coverage for NewTown Zone _____	Accepted by _____
T:\forms\PERMIT.FRM			SDP/Red-line approval date _____	



Howard County
Health Department

Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

February 9, 2011

Michael Joe Boyce
Professional Land Surveyor
ESE Consultants
Assistant Regional Director
7164 Columbia Gateway Drive
Columbia, MD 21046

RE: **Waiver Approval**
11259 Indepence Way
Ellicott City, MD 21043

Dear Mr. Boyce,

The Health Department has received your two waiver requests dated November 16, 2010 and December 9, 2011 for the above referenced property. The waiver to reduce the setback from the sewage disposal area (SDA) to the property line from ten (10) feet to five (5) feet has been approved. Additionally, the waiver to reduce the setback from the bioretention device from twenty-five (25) feet to twenty (20) feet has been approved. The storm water management device setback waiver has been approved based on the fact that the device is not designed to be infiltrative, is down grade of the SDA, will be piped with an outfall over twenty-five feet (25) from the SDA, and the lot was approved five years prior to the current storm water management regulations.

Approval of a building permit will be granted by this Department provided that the site plan submitted with the building permit application is consistent with the perc certification plan approved on February 9, 2011. Any deviations from the approved perc certification plan submitted with the request will be subject to further review by this Department.

Any questions regarding this decision may be directed to the Well and Septic Program of the Howard County Health Department.

Respectfully,

Michael J. Davis, R.S.
Assistant Director
Bureau of Environmental Health



12/09/10

Howard County Health Department
Howard County MD

**11259 Independence Way
Ellicott City MD 21043**

Re: Variance Request - Lot 56 - Homewood Crossing Subdivision

To Whom It May Concern:

Toll Brothers Inc. is requesting a variance in the setback distance between the septic reserve area and the Storm Water Management Device. As you know the current setback requirement is 25' of separation between these two areas. I'm requesting a variance reducing the setback to 20' separation in these two areas.

The purpose of this request is to meet the new regulations for Storm Water Management that went into affect May 4th 2010, approx. five years after these plans where approved.. The revision is necessary for construction of a new single family dwelling shown on the attached SWM design, perc cert revision and permit plot plan.

Please contact me directly should you have any questions. Thanks in advance for your cooperation.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael Joe Boyce".

Michael Joe Boyce
Professional Land Surveyor
ESE Consultants
Assistant Regional Director
7164 Columbia Gateway Drive
Columbia MD 21046
410-365-4175 Cell
mboyce@eseeng.com

ESE Consultants, Inc.

7164 Columbia Gateway Drive, Suite 230 · Columbia, MD 21046

p: 410.381.3095 · f: 410.872.4870



11/16/10

Howard County Health Department
Howard County MD

**11259 Independence Way
Ellicott City MD 21043**

Re: Variance Request - Lot 56 - Homewood Crossing Subdivision

To Whom It May Concern:

Toll Brothers Inc. is requesting a variance in the setback distance between the septic reserve area and the property line. As you know the current setback requirement is 10' of separation between these two areas. I'm requesting a variance reducing the setback to 5' separation in these two areas.

The purpose of this request is for a perc certification revision. The perc certification revision is necessary for construction of a new single family dwelling shown on the attached perc cert revision and permit plot plan.

Please contact me directly should you have any questions. Thanks in advance for your cooperation.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael Joe Boyce".

Michael Joe Boyce
Professional Land Surveyor
ESE Consultants
Assistant Regional Director
7164 Columbia Gateway Drive
Columbia MD 21046
410-365-4175 Cell
mboyce@eseeng.com

ESE Consultants, Inc.

7164 Columbia Gateway Drive, Suite 230 · Columbia, MD 21046

p: 410.381.3095 · f: 410.872.4870