

Permits: 410-313-2455
 Inspections: 410-313-1810
 Automated Line: 410-313-3800

Howard County Building/Fire Permit Application
 Department of Inspections, Licenses & Permits
 3430 Court House Drive
 Ellicott City, MD 21043

Permit Number:

B10003801

Building Address: 11234 Kinsale Court, Ellicott City
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 37
 Tax Map: 29 Parcel: 20 Grid: 4
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Winchester Homes
 Address: 6905 Rockledge Dr.
 City: Bethesda State: MD Zip Code: 20817
 Home Phone: _____ Work Phone: _____
 Applicant's Name & Mailing Address, (if other than stated herein):
JFA Contractors, Inc
4512 Sandy Spring Rd, Burtonsville
 Phone: 301-924-2111 Fax: 301-549-4206 MD 20886

Existing Use: SPH
 Proposed Use: Open deck
 Estimated Construction Cost: \$ _____
 Description of Work:
14x8 open deck - no steps
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: JFA Contractors, Inc.
 Contact Person: Jashita Rice
 Address: 4512 Sandy Spring Rd
 City: Burtonsville State: MD Zip Code: 20886
 License No.: MHC # 17489
 Phone: 301-924-2111 Fax: 301-549-4206
 Email: _____
 Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input checked="" type="checkbox"/> SF Townhouse	<u>Water Supply</u>
Depth <input checked="" type="checkbox"/> Width <input type="checkbox"/>	<input type="checkbox"/> Public
1 st floor:	<input type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> 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.

Applicant's Signature: Jashita Rice Print Name: Jashita Rice
 Date: 12/8/10
 Email Address: _____
 Title/Company: Authorized Agent

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY

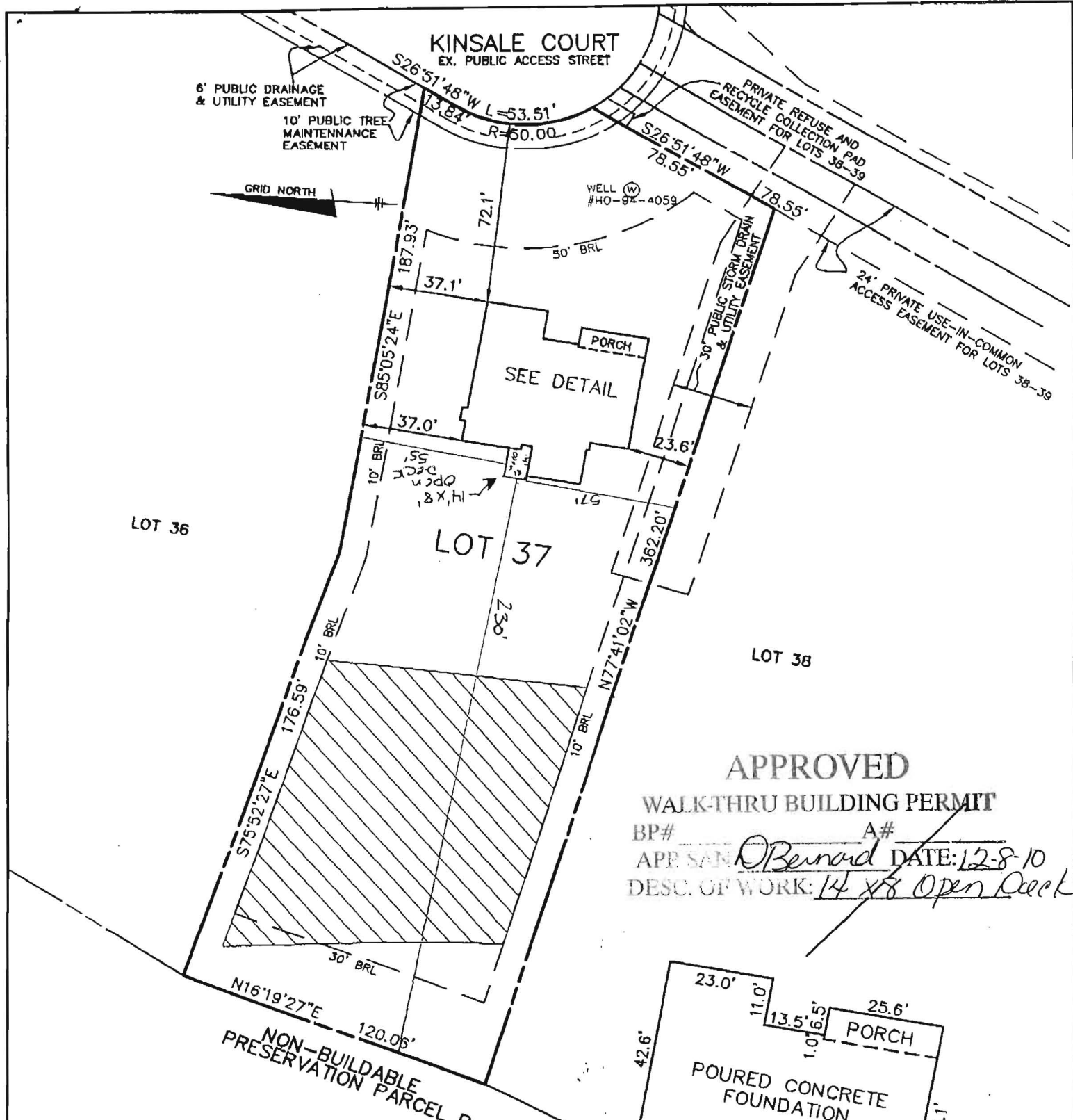
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>12-8-10</u>	<u>Dana Bernard</u>
Fire Protection		

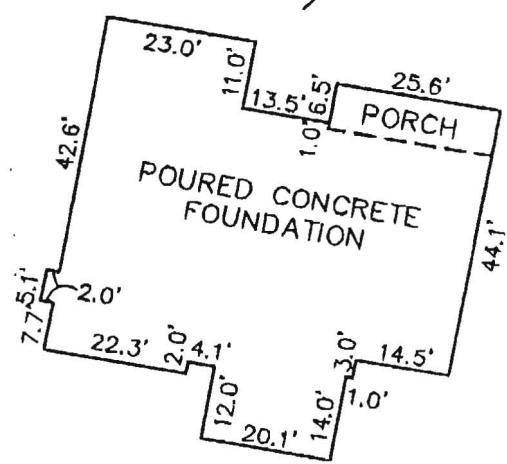
DPZ SETBACK INFORMATION

Front: _____
 Rear: _____
 Side: _____
 Side St.: _____
 All minimum setbacks met? Yes No
 Is Entrance Permit Required? Yes No
 Historic District? Yes No
 Lot Coverage for New Town Zone: _____
 SDP/Red-line approval date: _____

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$



APPROVED
WALK-THRU BUILDING PERMIT
 BP# _____ A# _____
 APP SAN O Bernard DATE: 12-8-10
 DESC. OF WORK: 14 x 8 Open Deck



TOP OF FOUNDATION WALL ELEVATION = 387.2'
 OFFSET DIMENSIONS TO PROPERTY LINES ARE ± 0.1'

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY TO THE BEST OF MY PROFESSIONAL KNOWLEDGE, INFORMATION AND BELIEF, THAT THE DIMENSIONS OF THE BUILDING WALLS SHOWN HEREON ARE CORRECT; THAT THEY ARE BASED ON A FIELD SURVEY PERFORMED BY BENCHMARK ENGINEERING, INC. ON 09/14/10.

Donald A. Mason
 DONALD A. MASON
 PROFESSIONAL LAND SURVEYOR
 MD REG. No. 21320
 FOR BENCHMARK ENGINEERING, INC.
 MD REG. No. 351
 FEMA FIRM No. 240044 0027 B
 ZONE: C
 DATED: 12/04/86



FOUNDATION DETAIL
 SCALE: 1" = 30'

WALL CHECK
RIVERWOOD
PHASE 1
PLAT No. 18033
LOT No. 37

11234 KINSALE COURT
 3RD ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' DATE: 09/14/10

FIELD OBS. BY
 COMP. BY
 DRAWN BY



8480 BALTIMORE NATIONAL PIKE • SUITE 418
 ELLICOTT CITY, MARYLAND 21043
 phone: 410-465-8105 • fax: 410-465-6644
 www.bci-civilengineering.com

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B/0002331

Building Address 1234 Kinsale Court
Ellicott City Md. 21047
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision Riverwood
 Section _____ Area _____ Lot 37
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot Size 4000 sq. ft.

Property Owner's Name Winchester Homes
 Address _____
 City _____ State _____ Zip Code _____
 Home Phone _____ Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated herein):
Coral Viers
 Phone _____ Fax _____

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ _____
 Description of Work _____
 Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Contractor Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 License No. _____
 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: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
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: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Heating System: 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"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 st floor: _____ 2 nd floor: _____ Basement: _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of Bedrooms _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____

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 _____

Print Name _____

Title/Company _____

Date _____

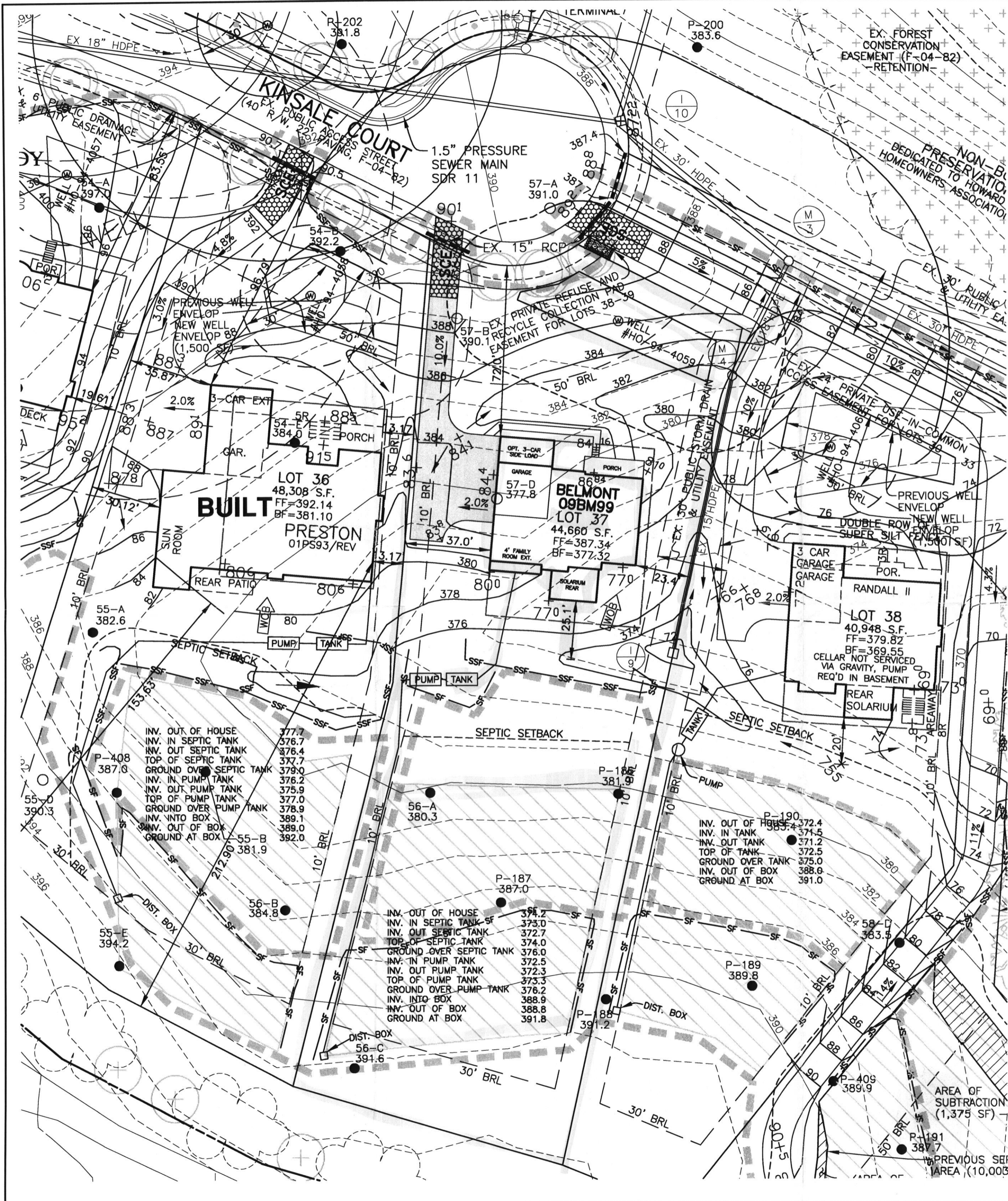
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

PLEASE WRITE NEATLY AND LEGIBLY.

- FOR OFFICE USE ONLY -

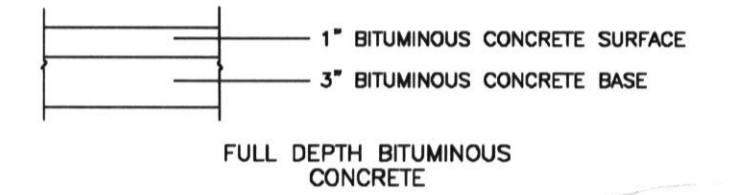
AGENCY	DATE	SIGNATURE	APPROVAL	DPZ SETBACK INFORMATION	Filing fee	PROPERTY ID #
Land Development, DPZ				Front: _____	\$ _____	
State Highways				Rear: _____	Permit fee \$ _____	
Building Officials				Side: _____	Excise tax \$ _____	
Dev. Engineering, DPZ				Side St.: _____	Add'l per fee \$ _____	
Health <u>4-5-10</u>		<u>DBernard</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 # _____	
				Historic District?	Validation # _____	
				YES <input type="checkbox"/> NO <input type="checkbox"/>		
				Lot Coverage for New Town Zone _____		
				SDP/Red-line approval date _____	Accepted by _____	

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:



NOTES:

1. THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR RIVERWOOD, PLAT No. 18033. REFER TO THE PLAT FOR LOT DIMENSIONS, LOT AREAS AND ALL EASEMENTS.
2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWERAGE EASEMENT. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
3. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER GP-05-31 AND MODIFIED FOR THIS SPECIFIC HOUSE.
4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE APPROVED ROAD CONSTRUCTION PLANS AND HAS BEEN FIELD VERIFIED BY J.A. RICE, INC., ON OR ABOUT SEPTEMBER 2002.
5. EXACT LENGTH OF SEPTIC TRENCHES ARE BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF TRENCH LAYOUT AND INSPECTION.
6. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
7. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
8. ALL DRAINAGE AND STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS.
9. SEPTIC TANK FOR THIS LOT TO BE 2,000 GALLONS.
10. THE EXISTING WELL SHOWN ON THIS PLAN, HO-94-4059, HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC. AND IS ACCURATELY SHOWN.
11. THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THIS PROJECT'S BOUNDARY EXCEPT AS NOTED.
12. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
13. STORMWATER MANAGEMENT FOR THIS LOT IS PROVIDED IN POND #4 OF F-04-082, A WET ED POND.



PAVING SECTION
NOT TO SCALE

LEGEND

- EXISTING CONTOURS ESTABLISHED UNDER F-04-082
- FIELD SURVEYED WELL LOCATION
- PASSED PERCOLATION TEST PER TEST NOTES
- FAILED PERCOLATION TEST PER TEST NOTES
- EXISTING APPROVED SEPTIC RESERVE AREA
- PROPOSED REVISED SEPTIC RESERVE AREA

Approved Septic System Plan
Howard County Health Department
Dana Bernard Signature
8-5-10 Date

BENCHMARK
ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS
ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418
ELLCOTT CITY, MARYLAND 21043
PHONE: 410-465-6105 ▲ FAX: 410-465-6644
EMAIL: benchmark@cais.com

OWNER/BUILDER: CAMBERLEY HOMES, INC. 6905 ROCKLEDGE DRIVE SUITE 800 BETHESDA, MD 20817 PHONE: 301-803-4800 FAX: 301-803-4929		PROJECT: RIVERWOOD LOT 37	
LOCATION: 11234 KINSALE COURT ELLCOTT CITY, MD 21042 TAX MAP No. 29 - BLOCK Nos. 3, 4, 9 & 10 - PARCEL No. 20 3rd ELECTION DISTRICT, HOWARD COUNTY, MARYLAND		TITLE: BUILDING PERMIT PLAN	
HOUSE TYPE: BELMONT		DATE: JULY, 2010	
DESIGN: JMC	DRAFT: JMC	SCALE: 1" = 30'	PROJECT NO. 1950 DRAWING 1 OF 1