

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
1300154104

Building Address 11979 Grayton Run
Ellicott City, MD 21043
 Suite/Apt.#: n/a SDP/WP/Petition #: SDP-03-30
 Census Tract 6030 Subdivision Homeland
 Section n/a Area n/a Lot 38
 Tax Map 16 Parcel _____ Grid 16
 Zoning RCDEO Map Coordinates 11A2 Lot size _____

Property Owner's Name NVR, Inc. t/a Ryan Homes
 Address 6085 Marshalee Dr. Ste# 140
 City ElkrIDGE State MD Zip Code 21075
 Home Phone _____ Work Phone 410-796-0980
 Applicant's Name & Mailing Address, (if other than stated hereon):
Building Permit Services, Inc. - Pat Orla
7806 Deboy Ave., Balto., MD 21222
 Phone 410-477-9666 Fax 410-477-8437

Existing Use SFD
 Proposed Use Same w/ Deck
 Estimated Construction Cost \$ 2000.00
 Description of Work Const open wood deck on rear of SFD
w/ steps to grade 12'x 15'

Contractor Company NVR, Inc. t/a Ryan Homes
 Contact Person Brain Peterson
 Address 6085 Marshalee Dr. Suite# 140
 City ElkrIGE State MD Zip Code 21075
 License No. MHBR#56
 Phone 410-796-0980 Fax 410-796-7094

Occupant or Tenant _____
 Contact Name _____
 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: <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"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <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	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>12'</u> <u>15'</u> 2nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ 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: <u>Post & Pier</u> Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <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 HERETO; (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 _____
 Title/Company _____
 Agent

Building Permit Services, Inc. - Pat Orla
 Print Name _____
 Date 5/26/05

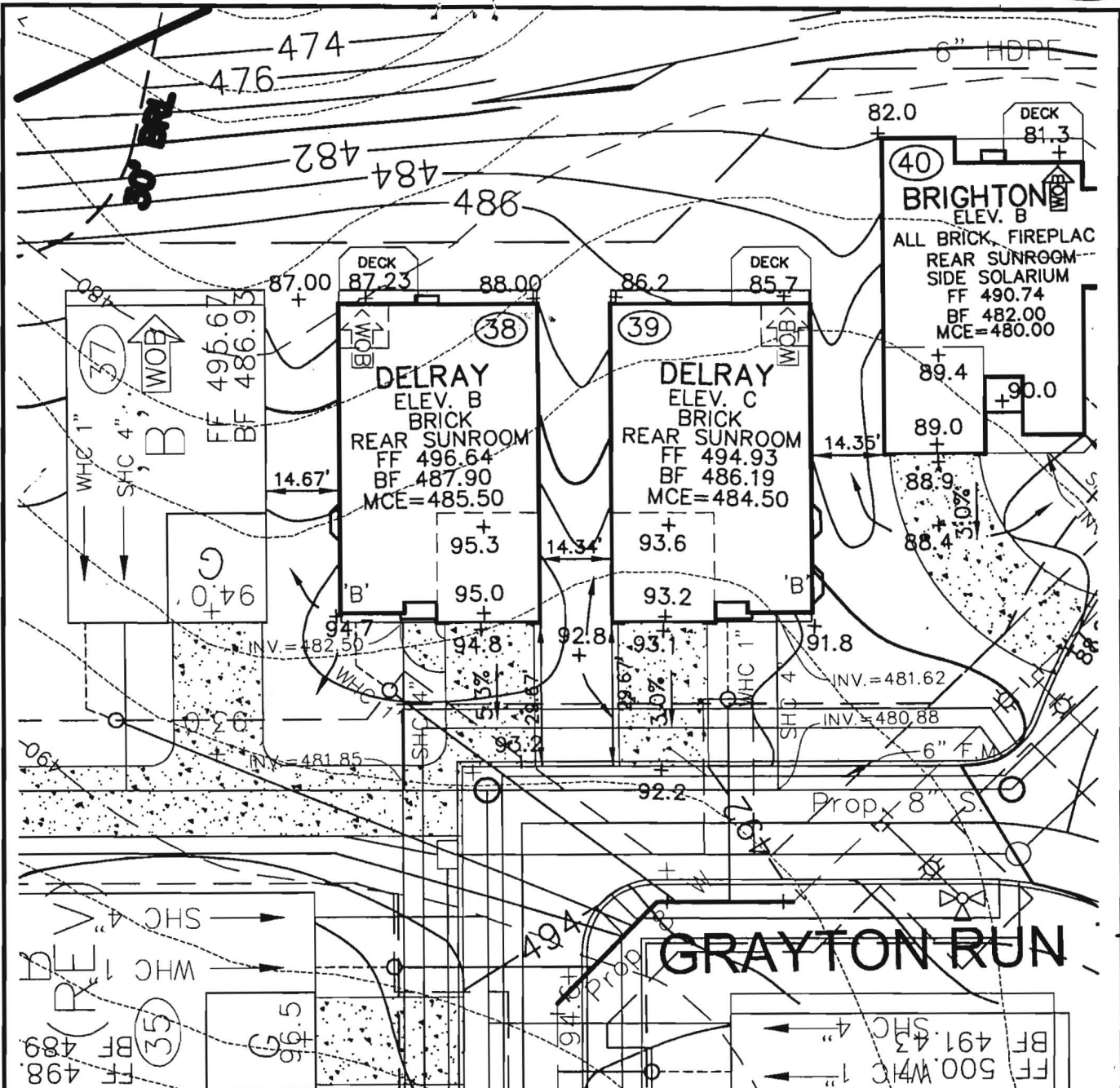
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
**** PLEASE WRITE NEATLY AND LEGIBLY. ****
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE	APPROVAL
Land Development DPZ			
State Highways			
Building Official			
Dev. Engineering DPZ	<u>6/2/05</u>	<u>[Signature]</u>	
Health			
Fire Protection			
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			
ONE STOP SHOP: <input type="checkbox"/>			

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	65414
Rear: _____	Filling fee \$ _____
Side: _____	Permit fee \$ _____
Side St.: _____	Excise tax \$ <u>55</u>
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Subtotal paid \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Lot Coverage for NewTown Zone _____	Balance due \$ _____
SDP/Red-line, approval date _____	Check # <u>22386</u>
Accepted by <u>[Signature]</u>	Validation # <u>71562</u>

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

6/2/05 Proposed Deck
 OK *(Signature)*



ROBERT H. VOGEL
ENGINEERING, INC.
 ENGINEERS • SURVEYORS • PLANNERS
 8407 MAIN STREET TEL: 410.461.7666
 ELLICOTT CITY, MD 21043 FAX: 410.461.8961

NOTE:
 ALL DIMENSION ARE FROM
 ARCHITECTURAL BRICK LEDGE.

SCALE 1"=30'
 DRAWN BY JCO
 CHECKED BY RHV
 DATE APRIL, 2005
 W. O. # 04-87.00
 SHEET# 1 OF 1

RYAN HOMES
ELLICOTT MEADOWS
UNIT 38

REV. 4/25/05
 HOMELAND SDP-03-30
 TAX MAP 16
 3RD ELECTION DISTRICT

PARCEL 53,96,165&204
 HOWARD COUNTY, MARYLAND

Building Address 11979 Homestead Green *Chrysler Bldg*
 Ellicott City, MD 21043

Suite/Apt. #: n/a SDP/WP/Petition #: SDP-03-30

Census Tract 6030 Subdivision Homeland

Section n/a Area n/a Lot 38

Tax Map 16 Parcel _____ Grid 16

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7806 Deboy Ave., Balto., MD 21222

Phone 410-477-9666 Fax 410-477-8437

Existing Use Vacant Lot

Proposed Use SFD- Condo

Estimated Construction Cost \$ 200,000.00

Description of Work Const SFD Condo "Deltay" w/Sun.Rm.
1-1/2sty, full bsmt, 10R, 3 FB, SunRm., gar(2Br)opt F.P. Fin. L.L.v
w/bath

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Contact Person Brain Peterson

Address 6085 Marshalce Dr. Suite# 140

City Elkridge State MD Zip Code 21075

License No. MHBR#56

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Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

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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"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <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	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: Depth <u>65'</u> Width <u>40'</u>	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: <u>29'</u> <u>40'</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>65'</u> <u>40'</u>	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Dimensions: Footings: <u>16"x8'</u> Roof: <u>Asp/Gable</u>
No. of Bedrooms <u>2</u>	Other Structure: _____
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	State Certified Modular <input type="checkbox"/> Manufactured Home <input type="checkbox"/>

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Pat Orla
 Applicant's Signature _____
 Agent

Title/Company _____

Building Permit Services, Inc. - Pat Orla
 Print Name _____
 4/25/05
 Date _____

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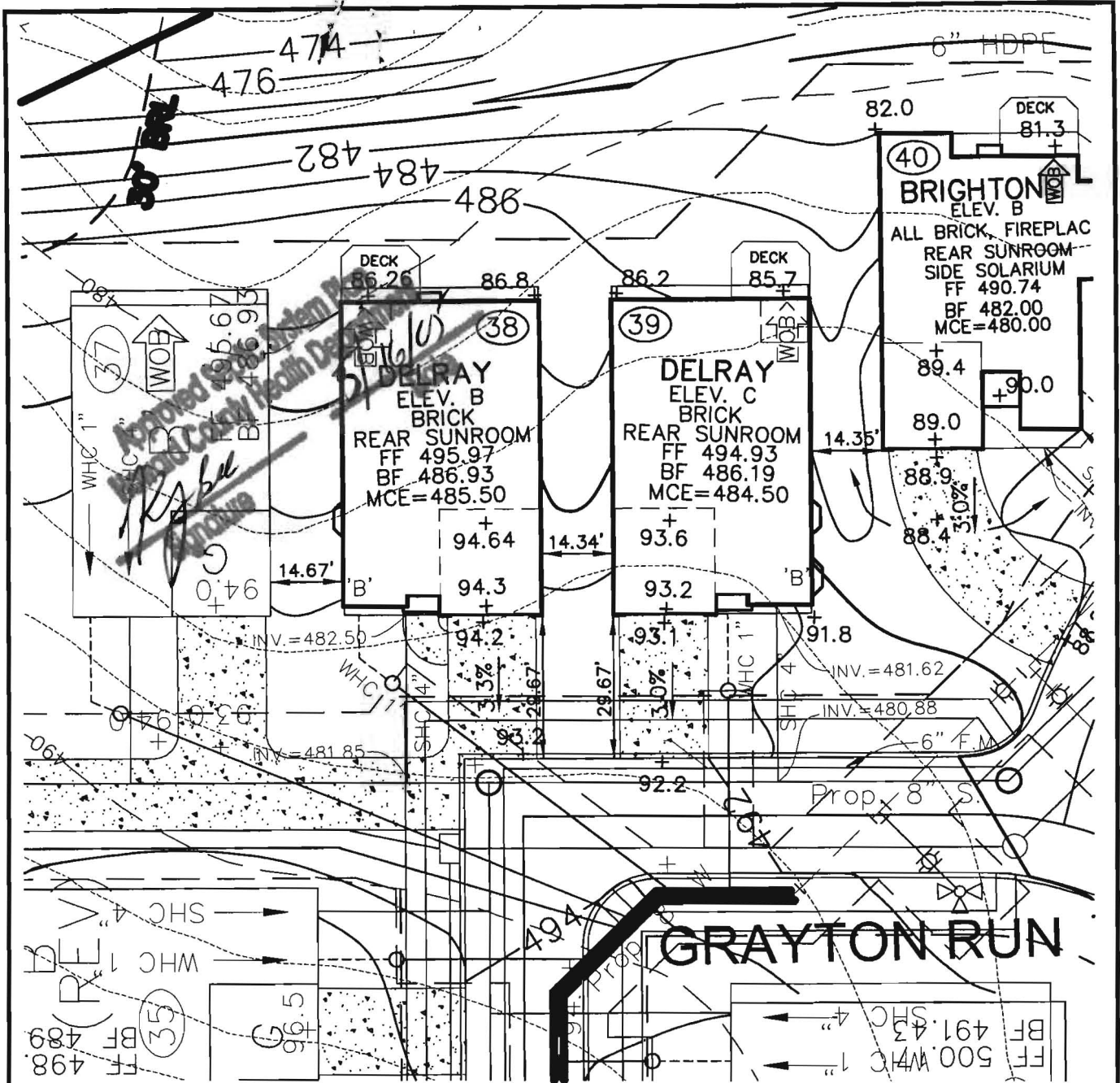
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AGENCY	DATE	SIGNATURE	APPROVAL
Land Development, DPZ			
State Highways			
Building Official	<u>5/19/05</u>	<i>[Signature]</i>	
Dev. Engineering, DPZ			
Health	<u>5/16/05</u>	<i>[Signature]</i>	
Fire Protection			
Is Sediment Control approval required prior to issuance?			

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	<u>65414</u>
Rear: _____	Filling fee \$ <u>100.00</u>
Side: _____	Permit fee \$ <u>929</u>
Side St.: _____	Excise tax \$ <u>430</u>
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Subtotal paid \$ <u>93</u>
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ <u>5762</u>
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Lot Coverage for NewTown Zone _____	Balance due \$ _____
SDP/Red-line, approval date _____	Check # <u>216379</u>
Accepted by <u>[Signature]</u>	Validation # <u>70749</u>

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