

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER
 307002334

Building Address 12810 Macbeth Farm lane
 Suite/Apt. #: _____ SDP/W/P/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot 1
 Tax Map 34 Parcel 90 Grid 24
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name NVR Inc A Virginia Corp
 Address 6085 Marshalee Dr.
 City Elkridge State MD Zip Code 21075
 Home Phone _____ Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon): _____
 Phone 410-379-5856 Fax 410-379-2450

Existing Use SED
 Proposed Use SED w/ Deck
 Estimated Construction Cost \$ 45,000
 Description of Work 22' x 7 1/2' x 9' (approx.) Deck w/ steps to grade and open pavilion

Contractor Company PROBUILT Construction, Inc.
 Contact Person Edward Pacylowski
 Address 13453 Long Days Ct.
 City Highland State MD Zip Code 20777
 License No. 20247
 Phone 301-854-0821 Fax 301-854-9632

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
 Height: _____
 No. of stories: _____
 Gross area, sq. ft. per floor: _____
 Use group: _____
 Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities
 Water Supply:
 Public
 Private
 Sewage Disposal:
 Public
 Private
 Electric Yes No
 Gas Yes No
 Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads _____

Building Characteristics
 SF Dwelling SF Townhouse
 Depth _____ Width _____
 1st floor: _____
 2nd floor: _____
 Basement:
 Finished Basement Unfinished Basement
 Crawlspace Slab on Grade
 No. of Bedrooms _____
 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: posts + piers
 Roof Height: _____
 State Certified Modular
 Manufactured Home

Utilities
 Water Supply:
 Public
 Private
 Sewage Disposal:
 Public
 Private
 Electric Yes No
 Gas Yes No
 Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other:

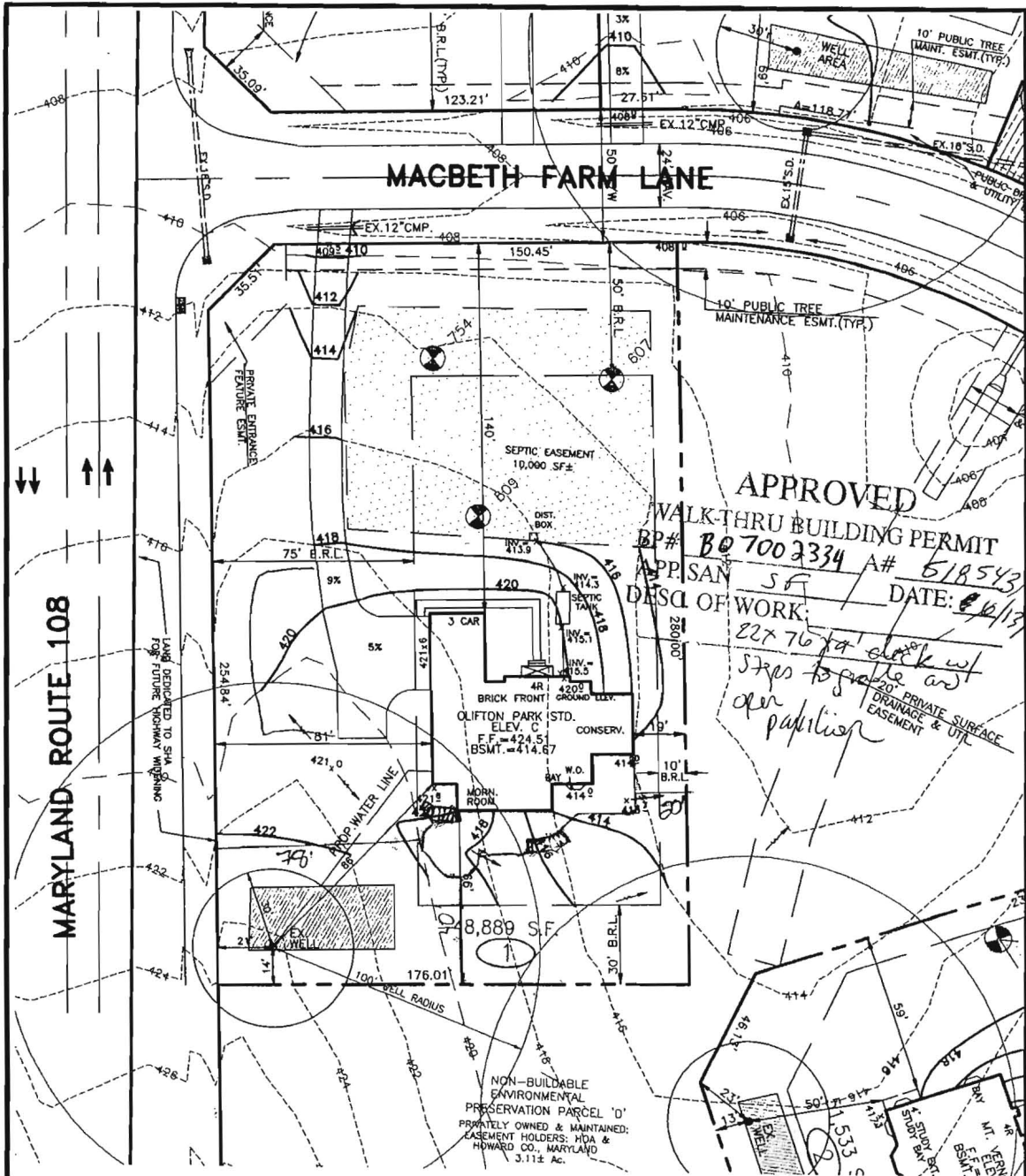
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER UPON THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature Edward Pacylowski
 Title/Company _____

Print Name Edward Pacylowski
 Date 6/13/07

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	PROPERTY ID#
Land Development DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering DPZ	<u>6/13/07</u>	<u>[Signature]</u>	Side St: _____	Add'l per. fee \$ _____
Health			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			Lot Coverage for NewTown Zone _____	
T:\norma\PERMIT.FRM			SDP/Red-line approval date _____	Accepted by _____
			Yellow: DED, DPZ Pink: Health Gold: SHA	



410-767
 -5537
 -5972
 5971
 Cynthia

APPROVED
 WALK-THRU BUILDING PERMIT
 BP# B07002334 A# 518543
 APPISAN SF
 DISC. OF WORK: DATE: 2/13/07
 22776 sq' work w/
 steps to garage and
 den
 per
 papilion

02-21-07 ADD SEPTIC INFO. PER HOWARD CO. HEALTH DEPT. (TB/db)

THE EXISTING WELL SHOWN ON THIS PLAN, WELL TAG #HD-95-0269 HAS BEEN FIELD LOCATED BY MORRIS & RITCHIE ASSOC. INC. PROFESSIONAL LAND SURVEYORS, AND IS ACCURATELY SHOWN.

SETBACKS: RR-DEO

- FRONT YARD: 50' MIN.
- SIDE YARD: 10' MIN.
- REAR YARD: 30' MIN.

EJECTOR REQUIRED TO SEWER BASEMENT.

CALL IN GROUND AT TIME OF S.O.

BUILDER
 N.V.HOMES
 6085 MARSHALEE DRIVE, SUITE 130
 ELKRIDGE, MARYLAND 21075
 PH: 410-379-5956



MORRIS & RITCHIE ASSOCIATES, INC.
 ENGINEERS, ARCHITECTS, PLANNERS, SURVEYORS, & LANDSCAPE ARCHITECTS
 3445-A Box Hill Corporate Center Drive
 Abingdon, Maryland 21009
 (410) 515-9000
 Fax: (410) 515-9002

SITE AND GRADING PLAN
 FOR
CLARKSVILLE OVERLOOK
 (A.K.A. MACBETH FARMS)
 LOT 1 #12810 MACBETH FARM LANE
 4TH ELECTION DISTRICT HOWARD CO., MARYLAND

Handwritten signature and date: 3/12/07

Form 101

06008499

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B07000474
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Building Address <u>1728 112 MacBeth Farm</u> <u>Clarksville MD</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>100106</u> Subdivision <u>Clarksville Overlook</u> Section <u>8</u> Area <u>2</u> Lot <u>1</u> Tax Map <u>34</u> Parcel <u>90</u> Grid <u>18</u> Zoning <u>RL</u> Map Coordinates <u>14D10</u> Lot size _____	Property Owner's Name <u>NV Homes</u> Address <u>6055 Marshalee Dr Suite 103</u> City <u>FLKRDGE</u> State <u>MD</u> Zip Code <u>21225</u> Home Phone _____ Work Phone <u>410 315 9200</u> Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone <u>410 315 9200</u> Fax _____
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Existing Use <u>VACANT LOT</u> Proposed Use <u>Single Family House</u> Estimated Construction Cost \$ <u>250,000</u> Description of Work <u>New 2 story with 3 car</u> <u>garage "CLIFTON PARK". Includes</u> <u>concrete, masonry, finished basement</u> <u>and air con. etc., masonry, roof, etc.</u>	Contractor Company <u>NVR Inc NV Homes</u> Contact Person <u>DUSTIN HILL</u> Address <u>6055 Marshalee Dr Suite 103</u> City <u>FLKRDGE</u> State <u>MD</u> Zip Code <u>21225</u> License No. <u>SL</u> Phone <u>410 315 9200</u> Fax <u>410 315 9200</u>
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Occupant or Tenant _____ Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company _____ Contact Person <u>Terry Bowan</u> Address _____ City _____ State _____ Zip Code _____ Phone <u>410-515-9000</u> Fax _____
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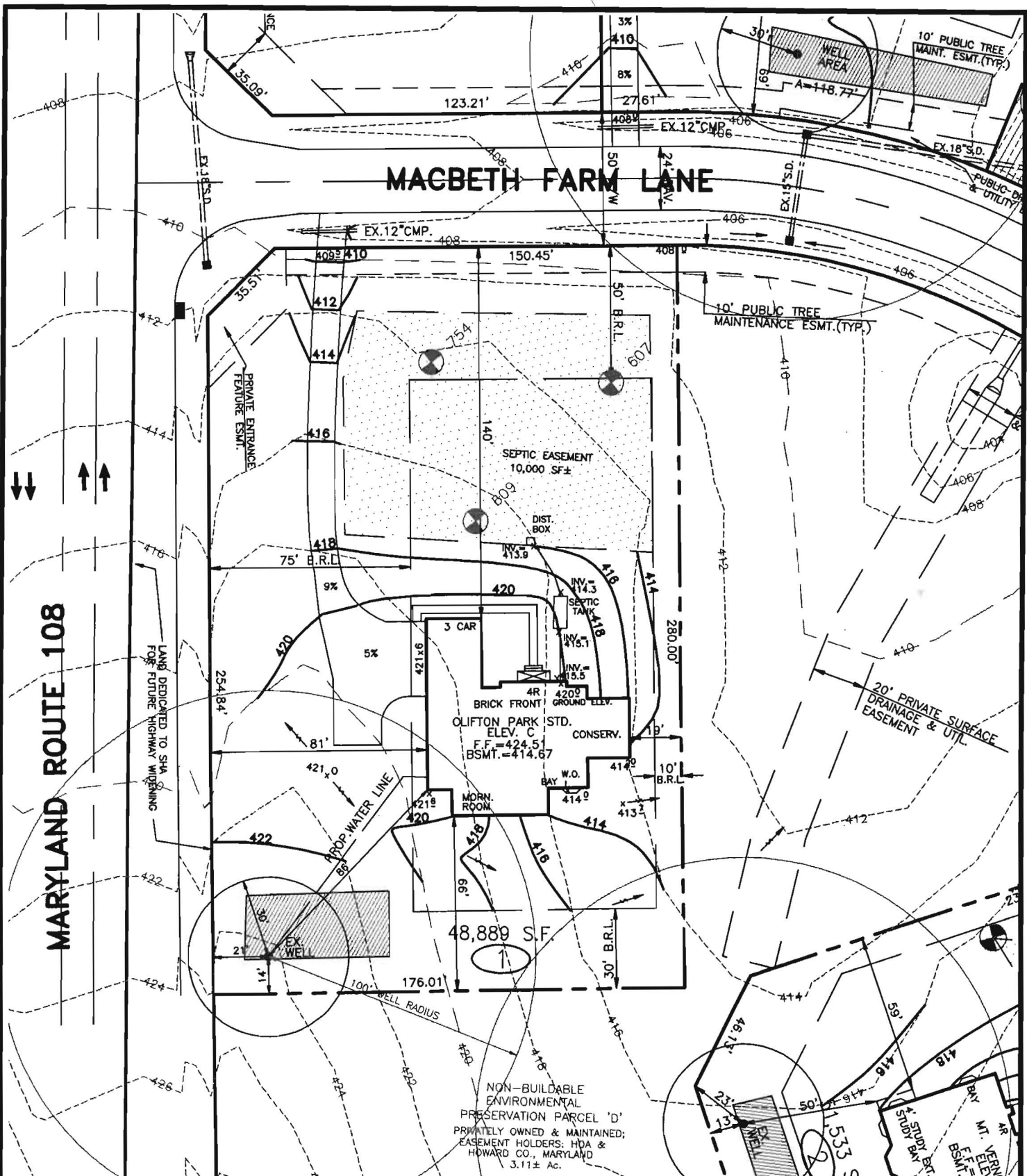
BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input 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"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>74</u> <u>75</u> 2nd floor: <u>54</u> <u>60</u> Basement: <u>64</u> <u>75</u> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</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: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input 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 checked="" 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 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.

<u>Terry Bowan</u> Applicant's Signature <u>and NV Homes</u> Title/Company	<u>Terry Bowan</u> Print Name <u>2/12/17</u> Date
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AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
<input checked="" type="checkbox"/> Land Development, DPZ			Front: _____	Filing fee \$ _____
<input checked="" type="checkbox"/> State Highways			Rear: _____	Permit fee \$ _____
<input checked="" type="checkbox"/> Building Official			Side: _____	Excise tax \$ _____
<input checked="" type="checkbox"/> Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
<input checked="" type="checkbox"/> Health	<u>3/5/17</u>	<u>[Signature]</u>	All minimum setbacks met?	TOTAL FEES \$ _____
<input checked="" type="checkbox"/> 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 checked="" type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>3103001</u>
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 -			Lot Coverage for NewTown Zone _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by <u>[Signature]</u>
Green: LDD, DPZ			Yellow: DED, DPZ	Pink: Health
Gold: SHA				



02-21-07 ADD SEPTIC INFO. PER HOWARD CO. HEALTH DEPT. (TB/db)

Approved Septic System Plan
 Howard County Health Department

THE EXISTING WELL SHOWN ON THIS PLAN, WELL TAG #HD-95-0269 HAS BEEN FIELD LOCATED BY MORRIS & RITCHIE ASSOC. INC, PROFESSIONAL LAND SURVEYORS, AND IS ACCURATELY SHOWN.

Joseph
 Signature Date 3/5/07

SETBACKS: RR-DEO

- FRONT YARD: 50' MIN.
- SIDE YARD: 10' MIN.
- REAR YARD: 30' MIN.

EJECTOR REQUIRED TO SEWER BASEMENT.

CALL IN GROUND AT TIME OF S.O.

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 6085 MARSHALEE DRIVE, SUITE 130
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SITE AND GRADING PLAN
 FOR
CLARKSVILLE OVERLOOK
 (A.K.A. MACBETH FARMS)
 LOT 1 #12810 MACBETH FARM LANE
 4TH ELECTION DISTRICT HOWARD CO., MARYLAND

SCALE: 1"=50'	DATE: JAN. 24, 2007	DRAWN BY: T.B.	DESIGN BY: T.B.	REVIEW BY: DA	JOB NO. 14948
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