

B1000 1111

Building Address 4655 MANOR LANE  
ELLICOTT CITY, MD 21042

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_

Tax Map 29 Parcel 107 Grid 5

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot Size \_\_\_\_\_

Property Owner's Name VLADIMIR BLYUKHER  
 Address 4655 MANOR LANE  
 City ELLICOTT CITY State MD Zip Code 21042  
 Home Phone 443-546-3727 Work Phone 443-642-8549  
 Applicant's Name & Mailing Address, (if other than stated herein): \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use SFD  
 Proposed Use Single-Family Detached - SFD  
 Estimated Construction Cost \$ 200,000  
 Description of Work New dwelling

Contractor Company HOME OWNER  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 License No. \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

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: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ 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: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular <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: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
Depth _____ Width _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
1 <sup>st</sup> floor: <u>34' x 50'</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2 <sup>nd</sup> floor: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input checked="" type="checkbox"/>	Sprinkler system: N/A <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
No. of Bedrooms <u>3</u>	
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: _____	
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 \_\_\_\_\_

Email Address \_\_\_\_\_

Title/Company \_\_\_\_\_

Print Name VLADIMIR BLYUKHER

Date 4/21/2010

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

- FOR OFFICE USE ONLY -

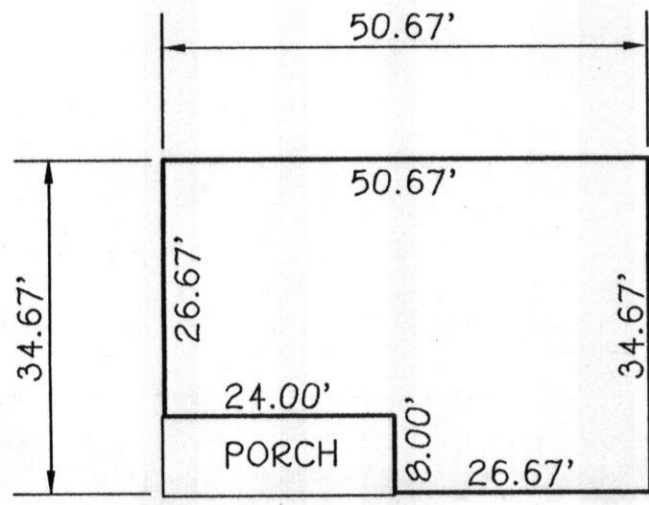
AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development, DPZ		
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> Dev. Engineering, DPZ		
<input checked="" type="checkbox"/> Health <u>5-10-10</u>		<u>Dana Bernard</u>
<input checked="" type="checkbox"/> Fire Protection		

Is Sediment Control approval required prior to issuance?  
 YES  NO

CONTINGENCY CONSTRUCTION START:   
 ONE STOP SHOP:

DPZ SETBACK INFORMATION	PROPERTY ID #
Front: _____	Filing fee \$ <u>100.00</u>
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit Required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for New Town Zone _____	Check # <u>2000</u>
SDP/Red-line approval date _____	Validation # _____
	Accepted by <u>[Signature]</u>

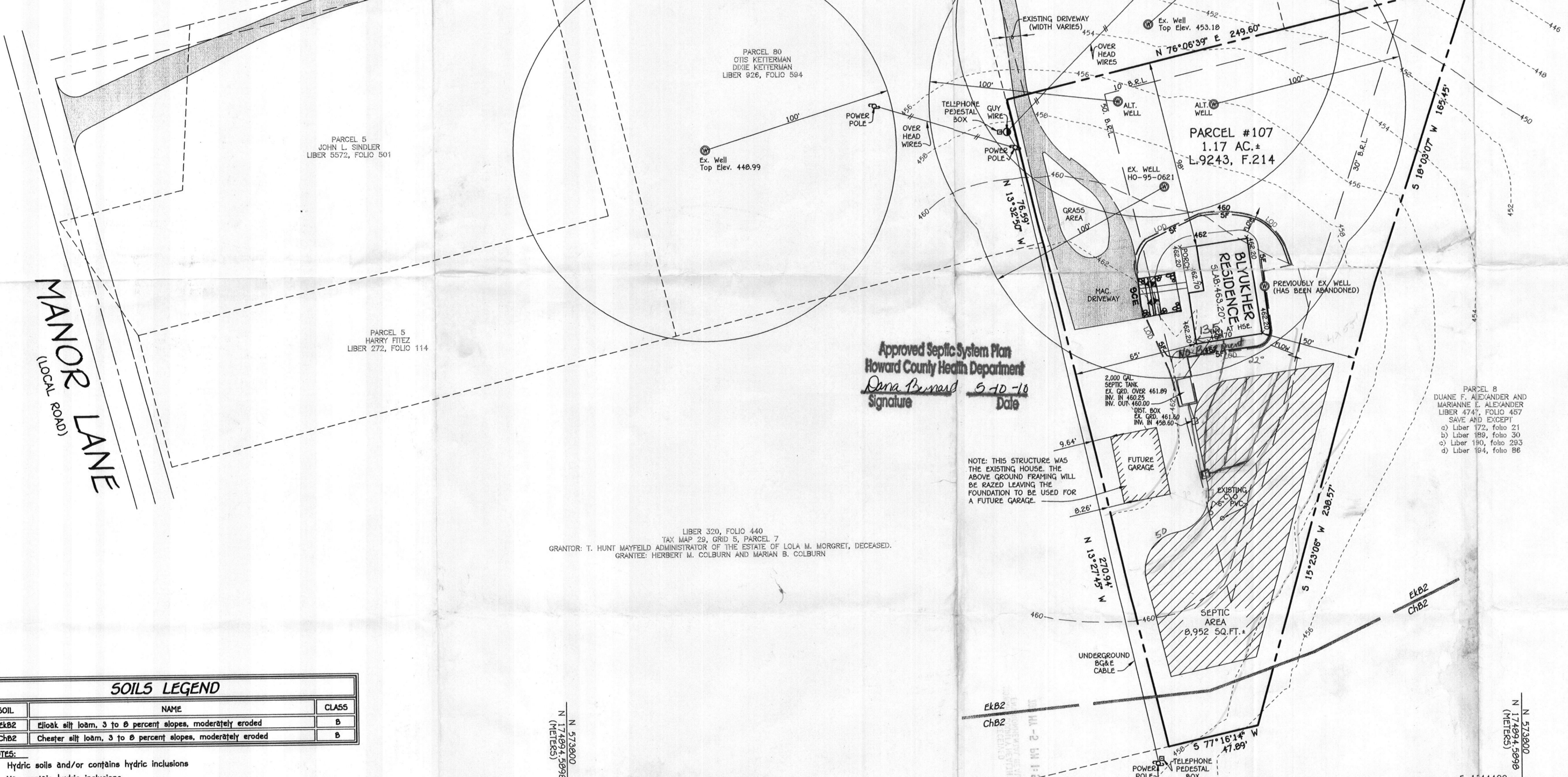
LEGEND	
SYMBOL	DESCRIPTION
---	EXISTING CONTOUR 2' INTERVAL
---	PROPOSED CONTOUR 2' INTERVAL
x362.5	SPOT ELEVATION
LOD	LIMITS OF DISTURBANCE
SF	SILT FENCE
⊕	POWER POLE
□	TELEPHONE PEDESTAL BOX



**BLYUKHER RESIDENCE**  
SCALE: 1"=20'



**VICINITY MAP**  
SCALE: 1" = 1,200'



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

NOTE: THIS STRUCTURE WAS THE EXISTING HOUSE. THE ABOVE GROUND FRAMING WILL BE RAZED LEAVING THE FOUNDATION TO BE USED FOR A FUTURE GARAGE.

- GENERAL NOTES**
1. THE SUBJECT PROPERTY IS ZONED RC-DEQ PER THE COMPREHENSIVE ZONING PLAN.
  2. TOTAL AREA OF PROPERTY: (50,895 SQ.FT.+) OR (1.17 ACRES+)
  3. TOTAL AREA DISTURBED IS 4,991 SQ.FT. (UNDER 5,000 SQ.FT.)
  4. THE SEPTIC EASEMENT SHOWN HEREON IS BASED ON AN APPROVED PERC CERTIFICATION DRAWING PREPARED BY FISHER, COLLINS & CARTER DATED OCTOBER 16, 2006 AND IS SUBJECT HOWARD COUNTY HEALTH DEPARTMENT REVIEW.
  5. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 8,952 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS 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. RECORDATION OF A REVISED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.
  6. LENGTH OF SEPTIC TRENCHES TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
  7. UNEQUAL LENGTH TRENCHES WITHIN THE SEPTIC EASEMENT WILL REQUIRE A LOW PRESSURE DOSE SYSTEM.
  8. THE EXISTING SEPTIC SYSTEM MUST BE PROPERLY ABANDONED PRIOR TO BUILDING PERMIT APPROVAL. UNLESS APPROVAL HAS BEEN GRANTED BY THE HEALTH DEPARTMENT FOR THE EXISTING HOUSE TO BE RAZED PRIOR TO THE ISSUANCE OF THE USE AND OCCUPANCY PERMIT.
  9. THE CONTRACTOR/BUILDER TO FIELD VERIFY ELEVATIONS BEFORE BEGINNING ANY CONSTRUCTION AND MUST PROVIDE POSITIVE DRAINAGE AWAY FROM THE BUILDING FOUNDATION AT ALL TIMES.
  10. FIELD RUN TOPOGRAPHIC SURVEY PREPARED BY FISHER, COLLINS & CARTER, INC. ON JULY 17, 2006.
  11. THIS SUBDIVISION IS EXEMPT FROM THE REQUIREMENTS OF THE FOREST CONSERVATION PROGRAM PER SECTION 16.1202(B)(1)(I) OF THE HOWARD COUNTY CODE BECAUSE THE DEVELOPMENT OF THIS PROPERTY WILL NOT CLEAR 20,000 SQUARE FEET OR GREATER OF FOREST AREA.
  12. THE EXISTING WELL SHOWN ON THIS PLAN, TAG NO. HO 95-0621 HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.
  13. DRIVEWAYS SHALL BE PROVIDED PRIOR TO ISSUANCE OF A USE AND OCCUPANCY PERMIT FOR ANY NEW DWELLINGS TO INSURE SAFE ACCESS FOR FIRE AND EMERGENCY VEHICLES PER THE FOLLOWING MINIMUM REQUIREMENTS:  
WIDTH - 12' (16' SERVING MORE THAN ONE RESIDENCE);  
SURFACE - 6" OF COMPACTED CRUSHER RUN BASE WITH TAR AND CHIP COATING (1-1/2" MIN.);  
GEOMETRY - MAX. 14% GRADE, MAX. 10% GRADE CHANGE AND MIN. 45' TURNING RADIUS;  
STRUCTURES (CULVERTS/BRIDGES) - CAPABLE OF SUPPORTING 25 GROSS TONS (H25 LOADING);  
DRAINAGE ELEMENTS - CAPABLE OF SAFELY PASSING 100-YEAR FLOOD WITH NO MORE THAN 1 FOOT DEPTH OVER DRIVEWAY;  
MAINTENANCE - SUFFICIENT TO INSURE ALL WEATHER USE.
  14. NO WETLANDS CURRENTLY EXIST ON THIS PROPERTY.
  15. THIS PLAN IS EXEMPT FROM STORMWATER MANAGEMENT AS THE TOTAL AREA OF DISTURBANCE IS UNDER 5000 SQ.FT.

SOILS LEGEND		
SOIL	NAME	CLASS
EkB2	Elloak silt loam, 3 to 8 percent slopes, moderately eroded	B
ChB2	Chester silt loam, 3 to 8 percent slopes, moderately eroded	B

**NOTES:**

- Hydric soils and/or contains hydric inclusions
- \*\* May contain hydric inclusions

Generally only within 100-year floodplain areas

APPROVED: DEPARTMENT OF PLANNING AND ZONING

CHIEF, DIVISION OF LAND DEVELOPMENT	DATE
CHIEF, DEVELOPMENT ENGINEERING DIVISION	DATE

**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10872 BALTIMORE NATIONAL PIKE  
ELICOTT CITY, MARYLAND 21042  
(410) 461-2895

**PROFESSIONAL CERTIFICATION**

I HEREBY CERTIFY THAT THE PLANS AND SPECIFICATIONS WERE PREPARED OR APPROVED BY ME AND THAT I AM A LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 9757, EXPIRATION DATE: 3/3/12.

*Dana Bernard*  
DATE: 4/15/10

**BUILDER/DEVELOPER**

VLADIMIR BLYUKHER AND ANZHELIKA ARTANOSHNYA  
4655 MANOR LANE  
ELICOTT CITY, MARYLAND 21042  
PHONE: (443) 929-9512

**PLAN TO ACCOMPANY BUILDING PERMIT**  
**VLADIMIR BLYUKHER PROPERTY**  
**4655 MANOR LANE**  
LIBER 9243, FOLIO 214  
SINGLE FAMILY HOME  
SECOND ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
TAX MAP: #29 GRID: #5 PARCEL: #107  
SCALE: 1"=30' APRIL 15, 2010

DEPARTMENT OF INSPECTIONS,  
LICENSES & PERMITS  
3430 COURT HOUSE DRIVE  
ELLCOTT CITY, MD 21043  
PERMITS (410) 313-2455  
INSPECTIONS (410) 313-1850

HOWARD COUNTY  
RESIDENTIAL  
HEATING-VENTILATION-AIR  
CONDITIONING AND  
REFRIGERATION PERMIT  
APPLICATION

HVACR PERMIT # MK000/090  
BUILDING PERMIT # B31000111

BUILDING ADDRESS: SUITE/APT:  
4655 MANOR LN. ELLICOTT CITY 21042

OWNERS NAME: Vladimir Blyukher  
ADDRESS: 4655 MANOR LANE

SUBDIVISION:  
CENSUS TRACT: SECTION: AREA:  
LOT: TAX MAP: PARCEL:  
BLOCK: ZONE:

CITY: ELLICOTT CITY  
STATE: MARYLAND  
ZIP CODE: 21042  
HOME PHONE: 443-642-8549 WORK PHONE:

PROPERTY ID: MAP COORDINATES:

TYPE OF IMPROVEMENTS: USE:

	CHECK ONE	HOW MANY
SINGLE FAMILY DWELLING	<input checked="" type="checkbox"/>	1 ZONES
SINGLE FAMILY TOWNHOUSE	<input type="checkbox"/>	___ ZONES
MULTI-FAMILY / HOTEL/MOTEL	<input type="checkbox"/>	___ ROOMS
ASSISTED LIVING HOMES (16 OR FEWER RESIDENTS)	<input type="checkbox"/>	___ ROOMS

COMPANY NAME: Advanced Heating & Cooling  
LICENSEE NAME: Richard Gilmore  
ADDRESS: 212 Business Center Drive  
CITY: Reisterstown  
STATE: Maryland ZIP CODE: 21136  
PHONE: 410-833-9445 HVACR LICENSE NO: 17486  
Mike - (443) 463-3270

New

- Heating and Air Conditioning
- Geo Thermal System
- Heating System Only
- Ductless Mini Splits
- Other Work (Describe):
- Thru The Wall Systems

Replacement

- Heating
- Air Conditioning
- Heating and Air Conditioning

Open Loop - Water,  
Potable Well

Additions and Alterations

- Heating
- Air Conditioning
- Heating and Air Conditioning

\*\*\*\*Replacement Geo Thermal Systems are not required; However, if a tax credit is being sought a permit is required\*\*\*\*

Zones

Permit Fee = # of Zones x \$40 =  
Technology Fee (10% of Permit Fee) =  
Plus Application Fee  
Total Fees Due =

1  
40  
4  
\$50.00  
94

Rooms

Permit Fee = # of Rooms x \$80 =  
Technology Fee (10% of Permit Fee) =  
Plus Application Fee \$50  
Total Fees Due =

\$50.00

I HAVE CAREFULLY EXAMINED AND READ THIS APPLICATION AND KNOW IT IS TRUE AND CORRECT. THE WORK DESCRIBED HEREIN WILL BE PERFORMED BY A STATE HVACR LICENSED PERSON(S), AND ALL WORK WILL BE PERFORMED IN COMPLIANCE WITH APPLICABLE CODES AND STANDARDS OF HOWARD COUNTY THE STATE OF MARYLAND.

SIGNATURE OF LICENSEE

Richard Gilmore

DATE

11/01/2010

PRINT NAME OF LICENSEE

r.gilmore@advancedhc.com

Email Address

Validation

Check Number: 4352  
Cash:  
Receipt Number: 203023

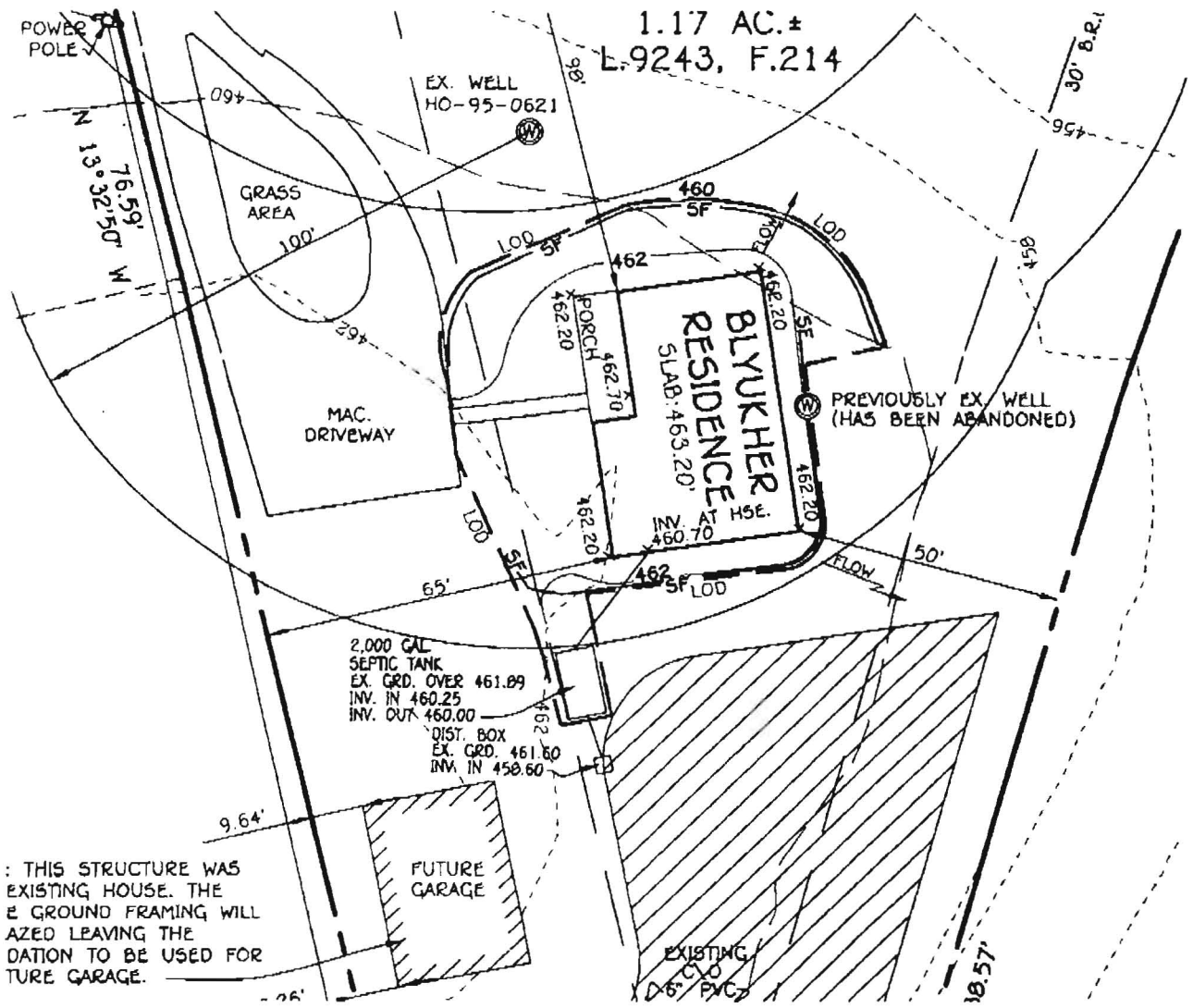
Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

Well + Septic

# Geothermal Heat Pump System

M10001096

Approved  
12/20/2010 *(BR)*

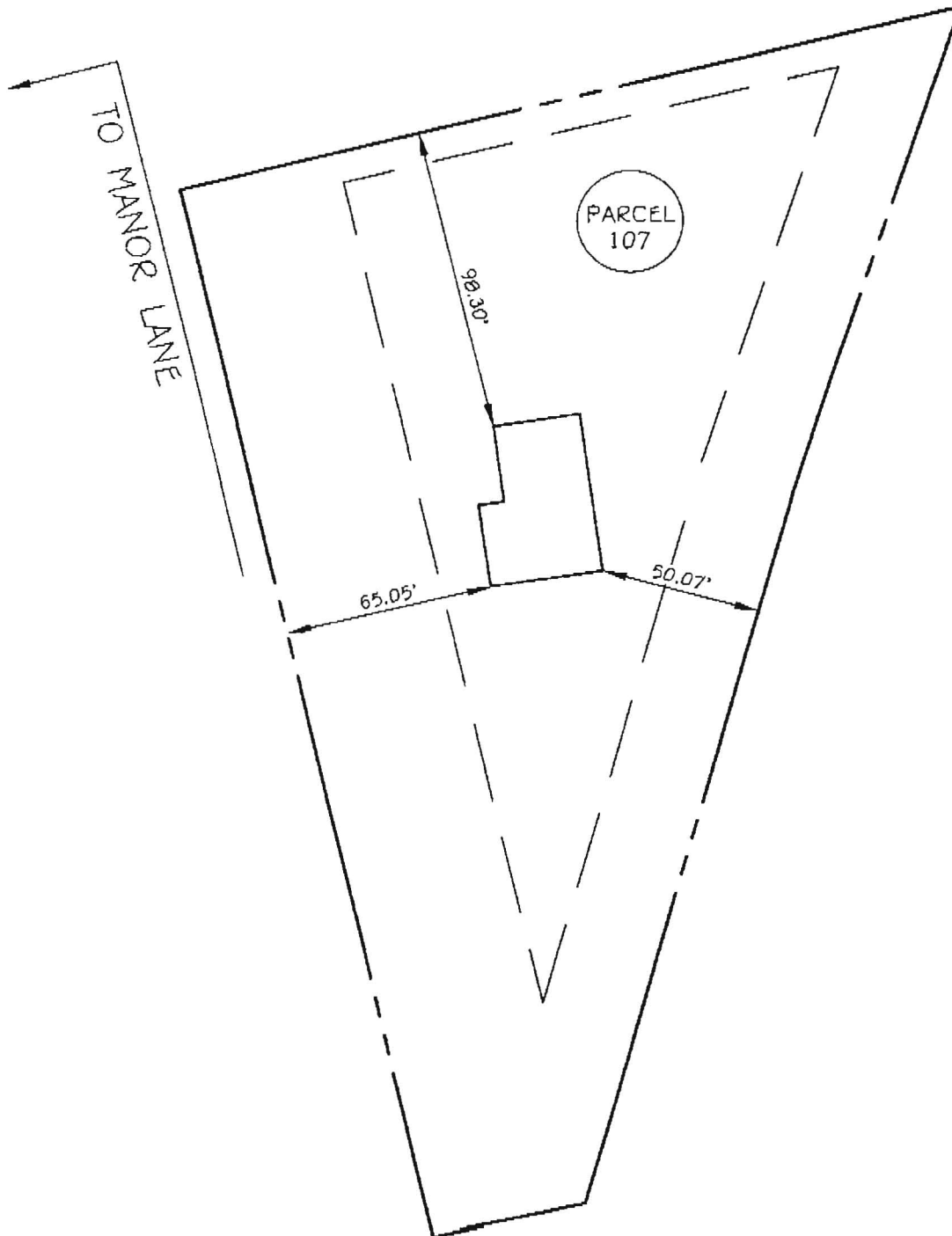


: THIS STRUCTURE WAS EXISTING HOUSE. THE E GROUND FRAMING WILL LEAVE THE DATUM TO BE USED FOR FUTURE GARAGE.

CUTSHEET FORM

PROJECT: BLUKHER PROPERTY W.O.# 06066  
DESCRIPTION: HOUSE STAKE-OUT  
DATE: 7/14/10 FIELD BOOK# 1138  
SHEET 1 OF 2 PARTY CHIEF: B.G.  
ENGINEER: A.K.O. CHECKED: M.L.R.

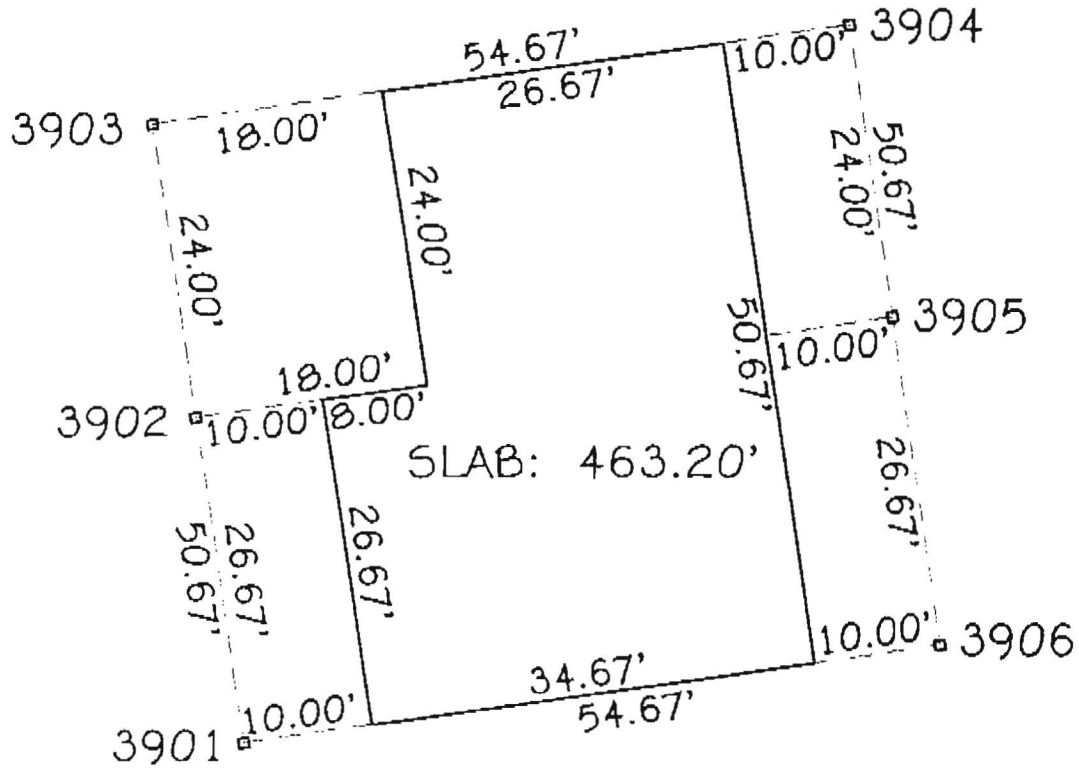
**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLICOTT CITY, MARYLAND 21042  
(410) 461 - 2955



**CUTSHEET FORM**

PROJECT: BLYUKHER PROPERTY W.O.# 06066  
 DESCRIPTION: HOUSE STAKE-OUT  
 DATE: 7/14/10 FIELD BOOK# 1138  
 SHEET 2 OF 2 PARTY CHIEF: B.G.  
 ENGINEER: A.K.O. CHECKED: M.L.R.

**FISHER, COLLINS & CARTER, INC.**  
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
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 ELLICOTT CITY, MARYLAND 21042  
 (410) 461 - 2855



STATION	ELEVATION		CUT	FILL	DESCRIPTION
	HUB	FINISHED SLAB ELEV.			
3901	462.31' -	463.20'	----	0.89'	OS 10.00' HSE. COR.
3902	462.20' -	463.20'	----	1.00'	OS 10.00'/18.00' HSE. COR.
3903	461.30' -	463.20'	----	1.90'	OIS 18.00' HSE. COR.
3904	459.59' -	463.20'	----	3.61'	OS 10.00' HSE. COR.
3905	461.23' -	463.20'	----	1.97'	OS 10.00' HSE. LINE
3906	460.70' -	463.20'	----	2.50'	OS 10.00' HSE. COR.