

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

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

Permit Number:

G 10000339
 B1200093

Building Address: 12819 Line Kln Rd.
Highland 20777

Suite/Apt. # _____ SDP/WP/BA #: _____

Census Tract: _____ Subdivision: Line Klnville

Section: _____ Area: _____ Lot: 19

Tax Map: 40 Parcel: 114 Grid: 21

Zoning: RR-DE2 Map Coordinates: _____ Lot Size: 3.15 AC

Existing Use: Vacant Lot

Proposed Use: SFD

Estimated Construction Cost: \$ 250,000

Description of Work: SFD, Model on file - Dalton, Hwy 4, 3 car side load garage, Alt. 2nd Flr, Full Rear Ext., mbr, FR fireplace, walkout BSMT.

Occupant or Tenant: Owner

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: Macle LLC

Address: 6830 Elm St FL 2

City: McLean State: VA Zip Code: 22101

Home Phone: 703-287-0582 Work Phone: _____

Applicant's Name & Mailing Address, (if other than stated herein):
Rachel Carr, 6536 Bayshore Rd.,
Rockville, MD 20850

Phone: 301-988-7367 Fax: _____

Email: Carrachea@gmail.com

Contractor Company: Craftmark Homes

Contact Person: Greg Lawler

Address: 6830 Elm St, 200

City: McLean State: VA Zip Code: 22101

License No.: 451-H36

Phone: 703-287-0582 Fax: _____

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
Area of construction (sq. ft.):	<u>Sewage Disposal</u>
Use group:	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Construction type:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Reinforced Concrete	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Structural Steel	<u>Heating System</u>
<input type="checkbox"/> Masonry	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> State Certified Modular	<u>Sprinkler System:</u>
<input type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> N/A
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Full
<input type="checkbox"/> Roadside Tree Project Permit #	<input type="checkbox"/> Partial
	<input type="checkbox"/> Other Suppression
	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL		
Building Characteristics	Utilities	
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>	
Depth	Width	<input type="checkbox"/> Public
1 st floor:		<input checked="" 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 checked="" type="checkbox"/> Unfinished Basement		Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space		Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade		<u>Heating System</u>
No. of Bedrooms: <u>4</u>		<input checked="" type="checkbox"/> Electric
		<input type="checkbox"/> Oil
No. of efficiency units:		<input type="checkbox"/> Natural Gas
No. of 1 BR units:		<input checked="" type="checkbox"/> Propane Gas
No. of 2 BR units:		
No. of 3 BR units:		
Other Structure:		
Dimensions:		
Footings:		<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:		<input type="checkbox"/> Yes <input checked="" 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: [Signature] Print Name: Rachel Carr

Email Address: Carrachea@gmail.com Date: 1/10/12

Title/Company: owner / CPS

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

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		
Fire Protection		

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

FOR OFFICE USE ONLY

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	\$ <u>150.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

796

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:

B12000013

Building Address: 12869 Lime Kiln Rd
highland 20777

Suite/Apt. # _____ SDP/WP/BA #: _____

Census Tract: _____ Subdivision: Lime Kiln Valley

Section: _____ Area: _____ Lot: 19

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: RR 1C Map Coordinates: _____ Lot Size: 1.5AC

Existing Use: Vacant lot

Proposed Use: SFD

Estimated Construction Cost: \$ 250,000

Description of Work: _____

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: Maple W LLC

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Applicant's Name & Mailing Address, (If other than stated herein): _____

Phone: _____ Fax: _____

Email: _____

Contractor Company: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip Code: _____

License No. : _____

Phone: _____ Fax: _____

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"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement: <u>sq. ft. 7714</u>	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input 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 type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms: <u>4</u>	<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"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	Roadside Tree Project Permit #
<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 _____

Email Address _____

Title/Company _____

Print Name _____

Date 1/10/12

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>3/2/12 Dan 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	\$

\$25.00 Check #234
Scanned 5/11/12

CPS

CARR PERMITTING SOLUTIONS

*No changes to plan
DB
OK
5-17-12*

5/10/2012

Avis Corbin
Howard County Permitting Department

re: Lot # 19, Maple Woods, Application #B12000093

Dear Ms. Corbin:

Please file and review the attached revised plot plans for issued permit #B12000093. These plans include a revision raising the house by 1.5 feet and increasing the slope on the sewer pipe coming from the septic tank to make it 2% instead of 1%. Please also find attached a check for \$25 for the amendment filing fee.

Thank you,



Rachel E. Carr
Carr Permitting Solutions for Craftmark Homes

CC: Health

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

B12000093

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

Permit Number:

B12001914

Building Address: 12869 Lime Kiln Rd. Highland
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Lime Kiln Valley
 Section: _____ Area: 2 Lot: 19
 Tax Map: 40 Parcel: 114 Grid: 21
 Zoning: _____ Map Coordinates: _____ Lot Size: 3.15 (A)

Property Owner's Name: Maple LLC
 Address: 6820 Elm St # 2
 City: McLean State: VA Zip Code: 22102
 Home Phone: _____ Work Phone: _____
 Applicant's Name & Mailing Address, (If other than stated herein):
Jeremy Clancy PO Box 1253
Eldersburg md 21754
 Phone: 443-340-1229 Fax: _____
 Email: JEREMY@AppliedAndApproved.com

Existing Use: SFD
 Proposed Use: SFD w/ propane tank
 Estimated Construction Cost: \$ 8000
 Description of Work:
install 1000 Gal B inground propane
Tank

Contractor Company: Valley National
 Contact Person: William Gerwig
 Address: 7201 Montevideo Rd
 City: Jessup State: MD Zip Code: 20794
 License No.: 67793
 Phone: 410-799-1114 Fax: _____
 Email: _____

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: owner
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: contractor
 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"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input checked="" 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 checked="" 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:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Footings:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Roof:	Roadside Tree Project Permit #
<input type="checkbox"/> State Certified Modular	
<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: [Signature]
 Email Address: Jeremy@AppliedAndApproved.com
 Title/Company: permits

Print Name: Jeremy Clancy
 Date: 6/4/12

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
Health	<u>6-13-12</u>	<u>Dave Bunsard</u>
Fire Protection		

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

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	\$ <u>100</u>
Tech Fee	\$ <u>10</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$ <u>110</u>
Balance Due	\$ <u>0</u>

Check 2914

Williams, Jeffrey

From: Stephanie Tuite [stephanie@saaland.com]
Sent: Monday, March 05, 2012 6:28 PM
To: Bernard, Dana; Williams, Jeffrey
Subject: Lime Kiln Valley, Lot 19, 12869 Lime Kiln Road
Attachments: LKVII_Lot19_Septic_Esmnt_rev.pdf

Importance: High

Dana / Jeff,

I was out sick Friday and was just looking at the comments that I received regarding the septic easement on Lot 19 as part of the building permit #B1200093. Although I do realize swales are not to be within septic easements, this easement was previously reviewed and approved and the swale even appeared in the test notes. I do however understand that the previous engineer on this project did not show the swales on their perc cert plan.

At this point, our building permit has been in for review since January 10th. I am hoping that we can work this issue out as soon as possible and that consideration be given to this being an unusual situation and that my client not be held responsible for righting other people's wrong doings. That being said, I have attached a preliminary layout for the septic easement in two pieces. Keep in mind that I will revise the grading around the house to make the septic layout work. The new septic easements I am proposing are 10 feet from the swale which I am hoping you will give consideration to the uniqueness of the situation we are in even though I realize this setback is usually more.

Retesting at this 11th hour is not an option since my client is bound by a contract with a buyer. The amount of additional time that would go along with retesting would put added hardship on our client and his buyer. I hope that a middle ground can be reached and that you find this plan acceptable. The smaller area closest to the house is 3,960 sq.ft. and the larger area closest to the boundary line is 6,857 sq.ft., a total of 10,817 sq.ft. These areas together should be adequate for 3 systems based on their individual sizes. The distribution box can be placed outside the swale just downhill of the originally proposed location. And please understand that I am only trying to make the best out of this bad situation. I tried once to resolve this issue when it came up with two other lots, but was told each lot would be looked at one at a time. Here we are stuck in a 60+ day review that I was originally trying to avoid. Let me know if you have any questions or if I can meet with both of you to discuss the septic issue and reach an expedited compromise. I will be out of the office most of tomorrow, so please email me or call my cell phone. Thanks for your time and consideration.

Steph

Stephanie J. Tuite, RLA, PE, LEED AP, ASLA

Sill, Adcock & Associates, LLC
3300 North Ridge Road, Suite 160
Ellicott City, Maryland 21043
office: (443) 325-7682 ext 29
fax: (443) 325-7685
cell: (410) 491-5962
email: stephanie@saaland.com

 Please consider the environment before printing this e-mail.

Williams, Jeffrey

From: Williams, Jeffrey
Sent: Tuesday, March 06, 2012 1:33 PM
To: 'Stephanie Tuite'
Cc: Bernard, Dana
Subject: RE: Lime Kiln Valley, Lot 19, 12869 Lime Kiln Road

Stephanie:

In light of the circumstances surrounding this project, we can accept the revised septic area as proposed on your attachment. What we will need moving forward is for you to submit a revised perc cert plan indicating this revised area. You were already in the middle of a revision to change the well box location, so your submission should be for both changes.

After that, you will need to submit a revised building permit plan showing the new septic and well box locations. For this lot, the initial septic system will be in the larger section on the left, so you can move the d-box location over to that area. You also should move the tank locations slightly to the left so they are out of the little swale you are creating on the side of the house. They can move to hug the new septic area.

Any questions, feel free to contact me. Thanks.

Jeff Williams
Program Supervisor, Well & Septic Program
Bureau of Environmental Health
Howard County Health Dept.
410-313-4261
jewilliams@howardcountymd.gov

CONFIDENTIALITY NOTICE

This message and the accompanying documents are intended only for the use of the individual or entity to which they are addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this email is not the intended recipient, you are hereby notified that you are strictly prohibited from reading, disseminating, distributing, or copying this communication. If you have received this email in error, please notify the sender immediately and destroy the original transmission.

From: Stephanie Tuite [mailto:stephanie@saaland.com]
Sent: Monday, March 05, 2012 6:28 PM
To: Bernard, Dana; Williams, Jeffrey
Subject: Lime Kiln Valley, Lot 19, 12869 Lime Kiln Road
Importance: High

Dana / Jeff,

I was out sick Friday and was just looking at the comments that I received regarding the septic easement on Lot 19 as part of the building permit #B12000093. Although I do realize swales are not to be within septic easements, this easement was previously reviewed and approved and the swale even appeared in the test notes. I do however understand that the previous engineer on this project did not show the swales on their perc cert plan.

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new septic easements I am proposing are 10 feet from the swale which I am hoping you will give consideration to the uniqueness of the situation we are in even though I realize this setback is usually more.

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Steph

Stephanie J. Tuite, RLA, PE, LEED AP, ASLA

Sill, Adcock & Associates, LLC

3300 North Ridge Road, Suite 160


Ellicott City, Maryland 21043

office: (443) 325-7682 ext 29

fax: (443) 325-7685

cell: (410) 491-5962

email: stephanie@saaland.com

 *Please consider the environment before printing this e-mail.*

January 27, 2012

Howard County Environmental Health Department
Well & Septic Program
7178 Columbia Gateway Drive
Columbia, Maryland 21046
ATTN: Dana Bernard

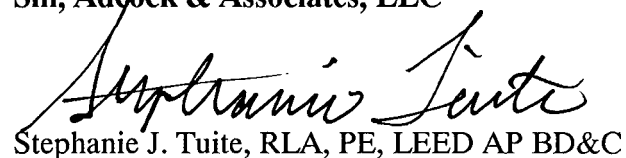
Re: Lime Kiln Valley II, Lot 19
12869 Lime Kiln Road, Permit # B12000093

Dear Ms. Bernard:

Enclosed please find one (1) original and two (2) copies of the revised Amended Percolation Certification Plan for the above referenced lot for your review and approval. The purpose of this amendment as previously mention in our letter on January 18, 2012 is to revise the location of the well box in order to accommodate stormwater management setbacks for proposed infiltration berms that will treat runoff from the propose house model and options desired by the buyer.

If you should you have any additional questions or comments regarding this matter, please do not hesitate to contact our office or email me at stephanie@saaland.com.

Sincerely,
Sill, Adcock & Associates, LLC


Stephanie J. Tuite, RLA, PE, LEED AP BD&C

cc: Greg Lauer, Craftmark Homes