

G-07000287

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
9430 COURT HOUSE DRIVE  
ELLICOTT CITY, MD 21043  
PERMITS (410) 313-2155 INSPECTIONS (410) 313-1810  
AUTOMATED INFORMATION (410) 313-3800

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B09001250

Building Address 12500 LIME KILN RD  
Highland MD 20777  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
Census Tract \_\_\_\_\_ Subdivision Lime Kiln Valley II  
Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 33  
Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_  
Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name NVR, Inc  
Address 6085 Marshlake Dr S 130  
City Edwards State MD Zip Code 21075  
Home Phone \_\_\_\_\_ Work Phone 410 379 5956  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Jim KERNIA Director Building Service  
P.O. Box 552 Woodbine MD 21797  
Phone 410 379 7792 Fax 410 417-0550

Existing Use Vacant lot  
Proposed Use Single family house  
Estimated Construction Cost \$ 300,000  
Description of Work New 2 story "Rogers Park"  
with 3 car garage, morning room,  
basement and finished basement

Contractor Company NV Homes  
Contact Person DAVE DUNN  
Address 6085 Marshlake Dr S 130  
City Edwards State MD Zip Code 21075  
License No. 56  
Phone 410 379 5956 Fax 410 379 2430

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"/> 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: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	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"/> Depth _____ Width _____ 1st floor: <u>68</u> x <u>66</u> 2nd floor: <u>56</u> x <u>60</u> Basement: <u>68</u> x <u>66</u> Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u> Height: <u>3.2</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 Height: _____ State Certified Modular _____ Manufactured Home _____	Water Supply: _____ Public _____ Private _____ Sewage Disposal: _____ Public _____ Private _____ Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" 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: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____

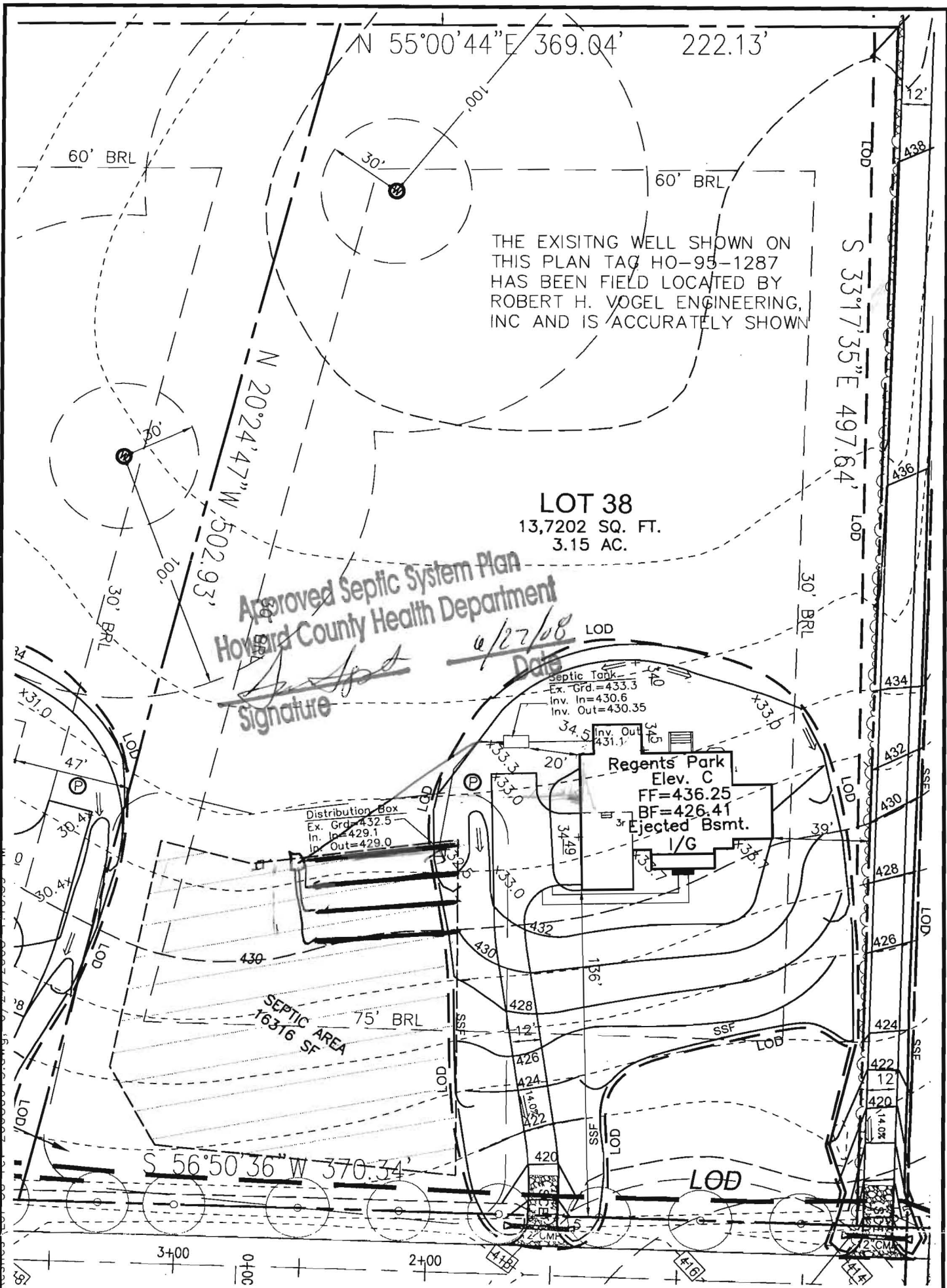
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED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

Jim Kernia  
Applicant's Signature  
Agent NV Homes  
Title/Company

Jim KERNIA  
Print Name  
6/29/08  
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	PROPERTY ID#
Land Development, DPZ			Front: _____	Filing fee \$ <u>100.00</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health	<u>6/27/08</u>	<u>[Signature]</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 # <u>[Signature]</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: _____	White: Building Official	Green: LDD, DPZ	Lot Coverage for New Town Zone _____	Accepted by _____
T:\forms\PERMIT.FRM			SDP/Red-line approval date _____	
			Yellow: DED, DPZ	
			Pink: Health	
			Gold: SHA	



THE EXISTING WELL SHOWN ON THIS PLAN TAG HO-95-1287 HAS BEEN FIELD LOCATED BY ROBERT H. VOGEL ENGINEERING, INC AND IS ACCURATELY SHOWN

**LOT 38**  
13,7202 SQ. FT.  
3.15 AC.

Approved Septic System Plan  
Howard County Health Department

Signature

6/27/08  
Date

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

NOTE:  
ALL DIMENSION ARE FROM ARCH BRICK LEDGE.

I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND LICENCE NO. 21774 EXPIRATION DATE 11-10-2009

SCALE	1"=50'
DRAWN BY	JAR
CHECKED BY	
DATE	June, 2008
W. O. #	04.21
SHEET#	1 OF 1

**NV HOMES  
LIME KILN VALLEY II  
LOT 38**

HOMELAND SDP-03-30 PARCEL 114 & 12  
TAX MAP 40 & 50 HOWARD COUNTY, MARYLAND  
5TH ELECTION DISTRICT



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