



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

RECEIVED

OCT 24 2012

Date Received: _____
LICENSES & PERMITS
DIVISION

Permit No.: **B12003587**

Building Address: 12815 Lime Kiln Rd
 City: Highland State: Md Zip Code: 20777
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Lime Kiln Valley
 Section: _____ Area: 2 Lot: 10
 Tax Map: 40 Parcel: 114 Grid: 21
 Zoning: _____ Map Coordinates: _____ Lot Size: 3.27 ⓐ

Property Owner's Name: James Melisa Kuttelberger
 Address: 12815 Lime Kiln Rd
 City: Highland State: md Zip Code: 20777
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Jeremy Clancy
 Address: po box 1253
 City: Eldersburg State: md Zip Code: 21784
 Phone: 413 340-1229 Fax: _____
 Email: Jeremy @ Applied and approved .com

Existing Use: SFD
 Proposed Use: SFD w/ propane tank
 Estimated Construction Cost: \$ 8000
 Description of Work: _____
Install 1000 gal in-ground propane tank

Contractor Company: Valley National Gas
 Contact Person: William Crews
 Address: 7201 Montevideo Rd
 City: Jessup State: md Zip Code: 20794
 License No.: 61793
 Phone: 410-799-1114 Fax: _____
 Email: _____

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

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: Contractor
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	<u>Depth</u>	<u>Width</u>
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	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	

Utilities
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
Sprinkler System:
<input type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number: _____
Building Shell Permit Number: _____

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.

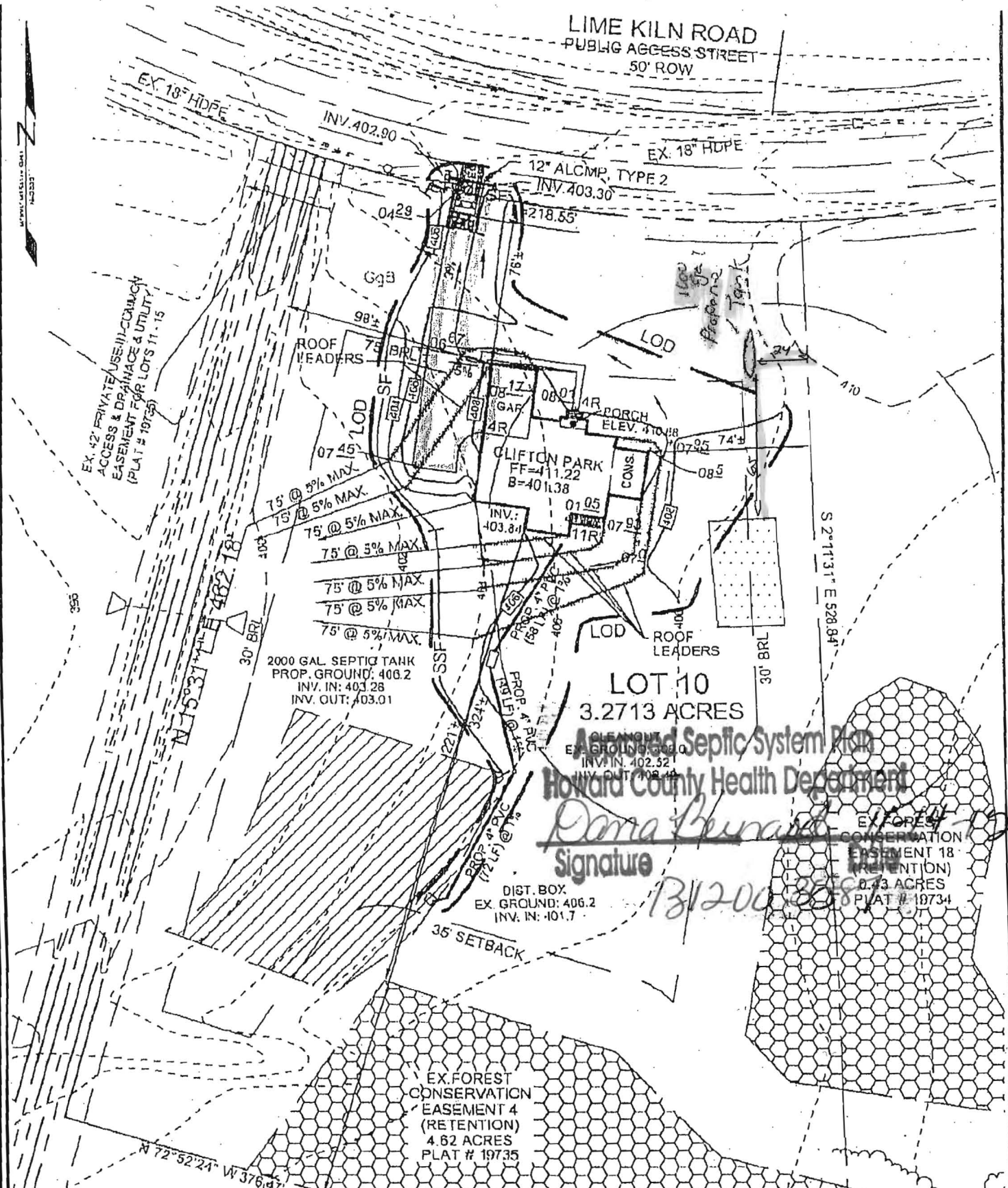
Applicant's Signature: [Signature] Print Name: Jeremy Clancy
 Email Address: Jeremy @ Applied and approved .com Date: 10/24/12
 Title/Company: Permits

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>11-14-12</u>	<u>[Signature]</u>
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START		

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>110</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>3134</u>



LIME KILN ROAD
PUBLIC ACCESS STREET
50' ROW

12" ALCMP, TYPE 2
INV. 403.30

CLIFTON PARK
FF=411.22
B=4011.38

2000 GAL SEPTIC TANK
PROP. GROUND: 406.2
INV. IN: 403.28
INV. OUT: 403.01

LOT 10
3.2713 ACRES

Approved Septic System Plan
Howard County Health Department

Dana Bernard
Signature

DIST. BOX
EX. GROUND: 406.2
INV. IN: 401.7

EX. FOREST
CONSERVATION
EASEMENT 4
(RETENTION)
4.62 ACRES
PLAT # 19735

Sill · Adcock & Associates · LLC

Engineers · Surveyors · Planners

3300 North Ridge Road, Suite 160
Ellicott City, Maryland 21043
Phone: 443.325.7682 Fax: 443.325.7685
Email: info@saaland.com

DEVELOPER
NY HOMES
5085 MARCHALEE DRIVE, SUITE 130
ELKRIEGE, MARYLAND 21075
(410) 379-5020

OWNER
MAPLE ESTATES, LC
6970 ELLI STREET, SUITE 200
MCLEAN, VIRGINIA 22101
(703) 734-9720

NOTE: 1) DRIVEWAY RUNOFF WILL BE TREATED BY THE EXISTING MICRO-POOL FACILITY. STORMWATER MANAGEMENT FOR THE HOUSE ON THIS LOT IS WILL BE SATISFIED BY ROOFTOP DISCONNECTION.
2) DISTURBED AREA = 23,585 SQ.FT.

DESIGN BY:	SJT
DRAWN BY:	SJT
CHECKED BY:	PS
SCALE:	1"=60'
DATE:	JULY 26, 2010
PROJECT #:	10-041
SHEET #:	1 OF 1

HOUSE SITE
LIME KILN VALLEY II
LOT 10
12815 LIME KILN ROAD

Joe Max

TAX MAPS 40 & 45 GRIDS 21 & 4
FIFTH ELECTION DISTRICT

PARCELS 114 & 12
HOWARD COUNTY MARYLAND

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

BB

Permit Number:

B11000229

Building Address: Highland 20777
12815 Lime kiln Rd Ellicott City, MD 21043

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

Census Tract: _____ Subdivision: Lime kiln Valley

Section: _____ Area: _____ Lot: 10

Tax Map: 40 Parcel: 114 Grid: 21

Zoning: _____ Map Coordinates: _____ Lot Size: 3.27 A

Existing Use: SFD

Proposed Use: SFD

Estimated Construction Cost: \$ 6,000

Description of Work:
install a 500 gal in ground propane tank

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: OWNER

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: NVR Inc

Address: 6085 Marshall Dr

City: Elkridge State: md Zip Code: 21075

Home Phone: _____ Work Phone: _____

Applicant's Name & Mailing Address, (If other than stated herein):
Jeremy Clary 7051 Macbeth Ln
Ellicott City, MD 21043

Phone: 443-340-1029 Fax: _____

Email: AppliedAndApproved@capaco.com

Contractor Company: Valley National Cranes

Contact Person: William Greising

Address: 7201 Montevideo Rd

City: Jessup State: MD Zip Code: 20794

License No.: 67793

Phone: 410-799-1114 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 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 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:	<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	<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]

Email Address: AppliedAndApproved@capaco.com

Title/Company: Permits

Print Name: Jeremy Clary

Date: 1/20/11

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>1/27/11</u>	<u>Brian Baker</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? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

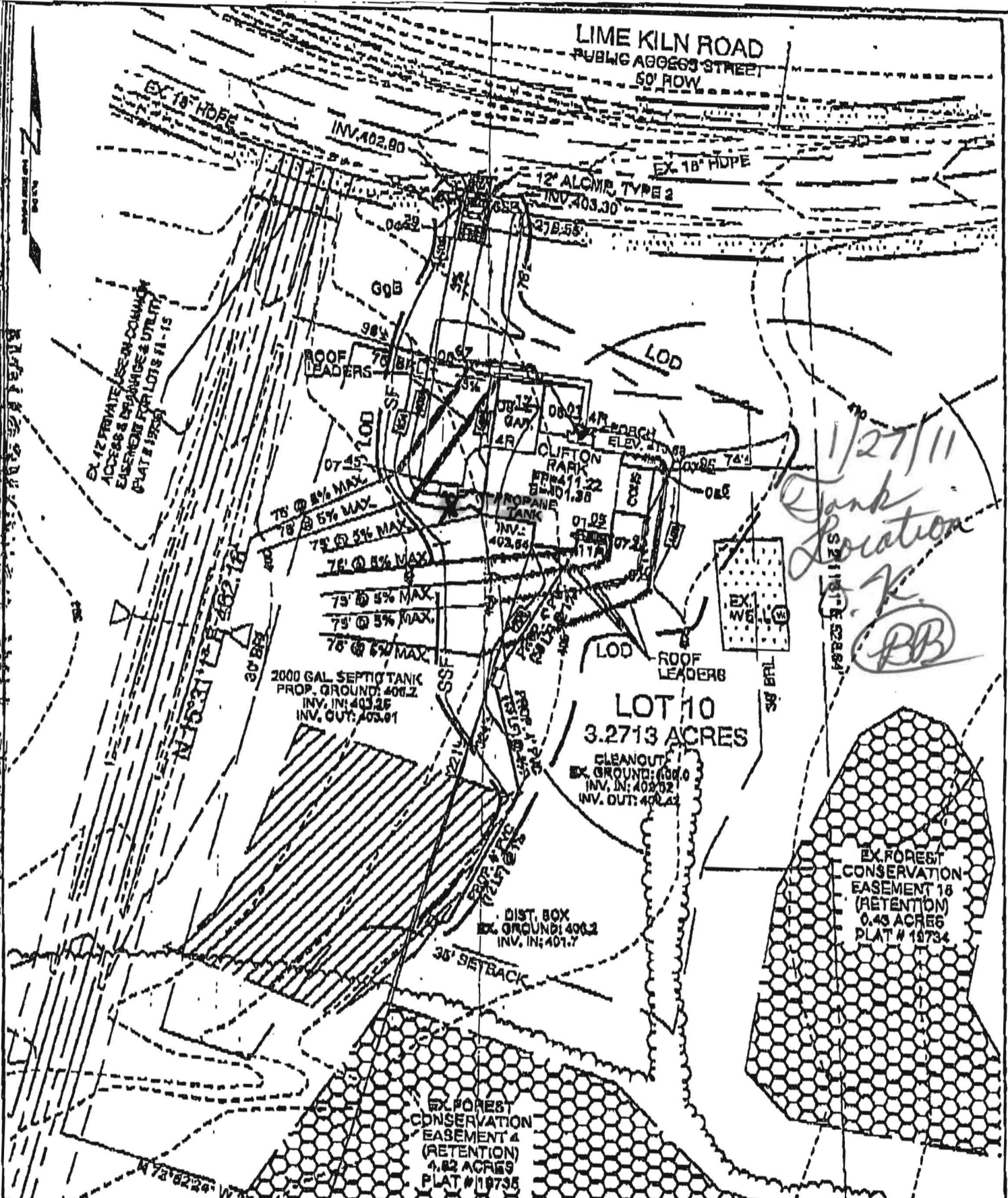
Filing Fee	\$
Permit Fee	\$ <u>100.00</u>
Tech Fee	\$ <u>10.00</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

clat 2208

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA
 T:\Operations\Updated Forms\New building app 11.10.2010.docx

APPROXIMATE PROPERTY LINES

0100-1



Sill · Adcock & Associates · LLC

Engineers · Surveyors · Planners

3300 North Ridge Road, Suite 160
 Ellicott City, Maryland 21043
 Phone: 443.325.7682 Fax: 443.325.7685

DEVELOPER
 NV HOMES
 6908 MARSHALER DRIVE, SUITE 130
 ELICOTT CITY, MARYLAND 21075
 (410) 578-0800

OWNER
 MAPLE ESTATES, LC
 0820 ELM STREET, SUITE 200
 MCLEAN, VIRGINIA 22101
 (703) 791-0700

NOTE: 1) DRIVEWAY RUNOFF WILL BE TREATED BY THE EXISTING MICRO-POOL FACILITY. STORMWATER MANAGEMENT FOR THE HOUSE ON THIS LOT IS WILL BE SATISFIED BY ROOFTOP DISCONNECTION, DISTURBED AREA = 28, 585 SQ. FT.

No. 0216

Dec. 29, 2010 1:47 PM

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

G10000271

B10003000

Building Address 12815 Lime Kiln Rd
Hightstown MD 20777
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision LIME KILN VALLEY
 Section _____ Area _____ Lot 10
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot Size _____

Property Owner's Name _____
 Address _____
 City Elkridge State MD Zip Code 21175
 Home Phone _____ Work Phone 301-279-1978
 Applicant's Name & Mailing Address, (if other than stated herein):
Tom Kerwin
PO Box 552
Elkridge, MD 21117
 Phone 443-391-7772 Fax 410-489-1150

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ 250,000
 Description of Work New 2 story "Club Park"
with 3 car garage, Bonus Bedroom,
Finished Basement
 Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Contractor Company _____
 Contact Person _____
 Address _____
 City Elkridge State MD Zip Code 21175
 License No. _____
 Phone 301-541-5472 Fax 301-2436
 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 _____ 1 st floor: <u>74 x 60</u> 2 nd floor: <u>54 x 60</u> Basement: <u>64 x 60</u>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
No. of Bedrooms <u>5</u>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	Sprinkler system: N/A <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
State Certified Modular _____ 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 Tom Kerwin
 Date 7/21/2010

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>150.00</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Officials			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per fee \$ _____
Health <u>10-6-10</u> <u>DBernard</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? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>			Is Entrance Permit Required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>619983</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Accepted by _____

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:

B11001265

Building Address: 12815 LIME KILN RD.

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

Census Tract: _____ Subdivision: LIME KILN VAL II

Section: _____ Area: _____ Lot: 10

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD

Proposed Use: SFD w/ DECK

Estimated Construction Cost: \$ 27K

Description of Work: CONSTRUCT DECK 24x25
TWO LEVEL w/ STEPS

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: KETTLEBERGER

Address: 12815 LIME KILN RD

City: FULTON State: MD Zip Code: 20759

Home Phone: _____ Work Phone: _____

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

Phone: _____ Fax: _____

Email: _____

Contractor Company: VACHINO MASONRY CONST. CO. INC

Contact Person: ED VACHINO

Address: 17 GLEN DAIRY CT

City: PARKTON State: MD Zip Code: 21120

License No.: MALC 6499

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 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 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:	<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	<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]

Email Address: N/A

Title/Company: _____

Print Name: MIKE MARLOWE

Date: 5/5/11

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>[Signature]</u>
Fire Protection		

DPZ SETBACK INFORMATION

Front: _____

Rear: _____

Side: _____

Side St.: _____

All minimum setbacks met? Yes No

Is Entrance Permit Required? Yes No

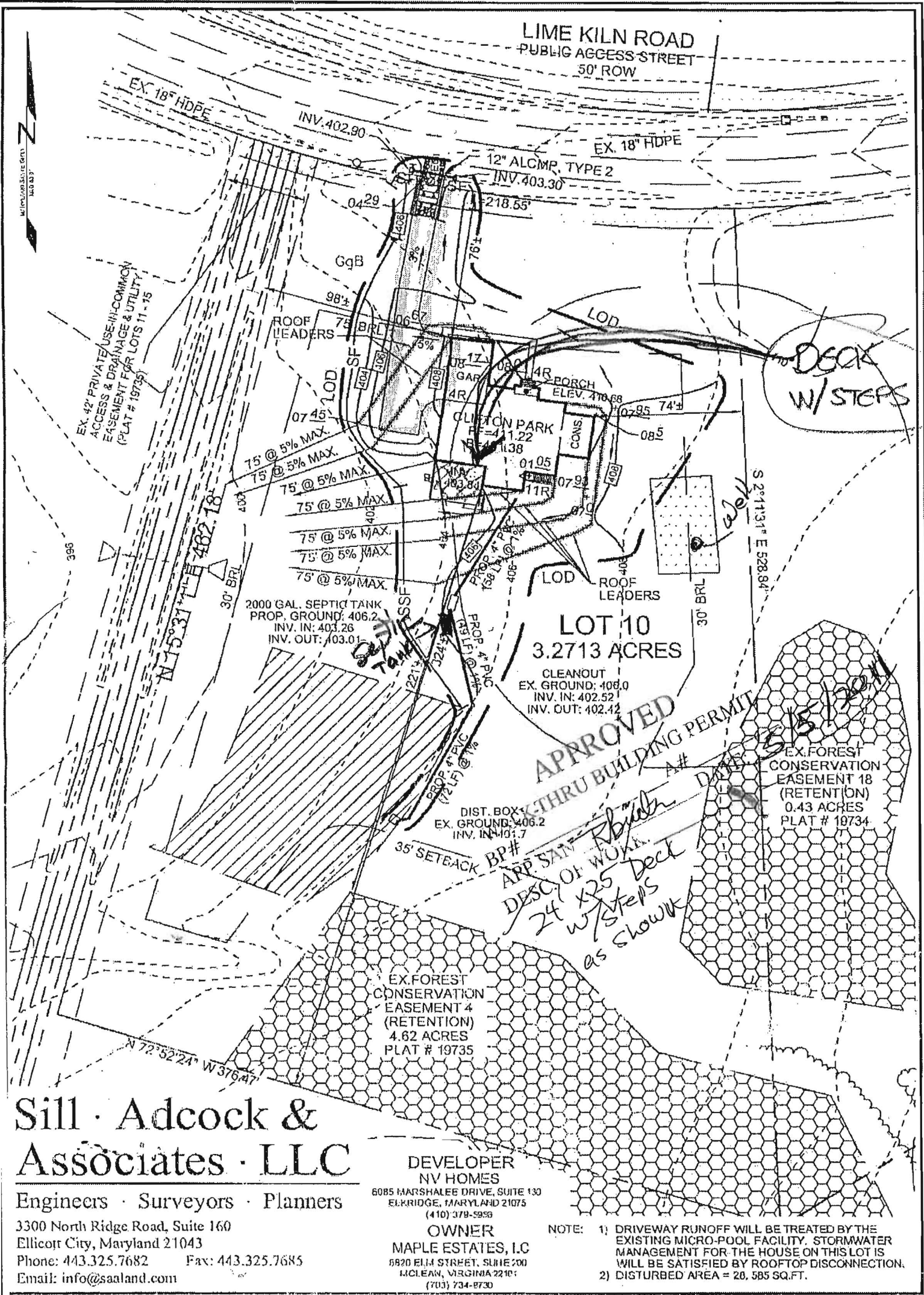
Historic District? Yes No

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	\$

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA



Sill · Adcock & Associates · LLC
Engineers · Surveyors · Planners
3300 North Ridge Road, Suite 160
Ellicott City, Maryland 21043
Phone: 443.325.7682 Fax: 443.325.7685
Email: info@saaland.com

DEVELOPER
NV HOMES
6085 MARSHALEE DRIVE, SUITE 130
ELK RIDGE, MARYLAND 21075
(410) 378-5939

OWNER
MAPLE ESTATES, I.C.
5920 ELM STREET, SUITE 200
MCLEAN, VIRGINIA 22101
(703) 734-8730

NOTE: 1) DRIVEWAY RUNOFF WILL BE TREATED BY THE EXISTING MICRO-POOL FACILITY. STORMWATER MANAGEMENT FOR THE HOUSE ON THIS LOT IS WILL BE SATISFIED BY ROOFTOP DISCONNECTION.
2) DISTURBED AREA = 20, 585 SQ.FT.

DESIGN BY: SJT
DRAWN BY: SJT
CHECKED BY: PS
SCALE: 1"=60'
DATE: JULY 26, 2010
PROJECT #: 10-041
SHEET #: 1 OF 1

HOUSE SITE
LIME KILN VALLEY II
LOT 10
12815 LIME KILN ROAD

TAX MAPS 40 & 45 GRIDS 21 & 4
FIFTH ELECTION DISTRICT

PARCELS 114 & 12
HOWARD COUNTY, MARYLAND

LIME KILN ROAD
PUBLIC ACCESS STREET
50' ROW

EX. 18" HDPE

EX. 18" HDPE

12" ALCMP, TYPE 2

L=218.55'
INV. 405.20

INV. 406.05

EX. 42" PRIVATE/USE-IN-COMMON
ACCESS & DRAINAGE & UTILITY
EASEMENT FOR LOTS 11-15
(PLAT # 19735)

GqB

148±
75' BRL



Approved Septic System Plan
Howard County Health Department

Sales Trailer approved as shown
using bottled water
Hand Sanitizer
Electric-Chair
Toilets

Signature

\$10001950

LOT 10
3.2713 ACRES

Date 7/13/2010

EX. FOREST
CONSERVATION
EASEMENT 18
(RETENTION)
0.43 ACRES
PLAT # 19734

EX. FOREST
CONSERVATION
EASEMENT 4
(RETENTION)
4.62 ACRES
PLAT # 19735

35' SETBACK

Sill · Adcock & Associates · LLC

Engineers · Surveyors · Planners

3300 North Ridge Road, Suite 160
Ellicott City, Maryland 21043
Phone: 443.325.7682 Fax: 443.325.7685
Email: info@saaland.com

OWNER
MAPLE ESTATES, LC
6820 ELM STREET, SUITE 200
MCLEAN, VIRGINIA 22101
(703) 734-9730

DEVELOPER
CRAFTMARK HOMES
6820 ELM STREET, SUITE 102
MCLEAN, VIRGINIA 22101
(703) 930-0814

DESIGN BY:	SJT
DRAWN BY:	SJT
CHECKED BY:	PS
SCALE:	1"=60'
DATE:	JUNE 24, 2010
PROJECT #:	10-021
SHEET #:	1 OF 1

SALES TRAILER SITE LIME KILN VALLEY II

LOT 10
LIME KILN ROAD

TAX MAPS 40 & 45 GRIDS 21 & 4
FIFTH ELECTION DISTRICT

PARCELS 114 & 12
HOWARD COUNTY, MARYLAND

LIME KILN ROAD
PUBLIC ACCESS STREET
50' ROW

EX. 18" HDPE

EX. 18" HDPE

12" ALCMP, TYPE 2

L=218.55'
INV. 405.20

INV. 406.05

EX. 42' PRIVATE/USE-IN-COMMON
ACCESS & DRAINAGE & UTILITY
EASEMENT FOR LOTS 11 - 15
(PLAT # 19735)

148'±
75' BRL

LEVEL ENTRY
TEMPORARY
SALES TRAILER

Approved Septic System Plan
Howard County Health Department
Sales Trailer approved as shown
using bottled water
Hand sanitizer
Electric Chlorine
Toilets
Signature *R. B. Wilson*
Date 7/13/2010
LOT 10
3,2713 ACRES

EX. FOREST
CONSERVATION
EASEMENT 18
(RETENTION)
0.43 ACRES
PLAT # 19734

EX. FOREST
CONSERVATION
EASEMENT 4
(RETENTION)
4.62 ACRES
PLAT # 19735

35' SETBACK

Sill · Adcock & Associates · LLC

Engineers · Surveyors · Planners
3300 North Ridge Road, Suite 160
Ellicott City, Maryland 21043
Phone: 443.325.7682 Fax: 443.325.7685
Email: info@saaland.com

OWNER
MAPLE ESTATES, LC
6820 ELM STREET, SUITE 200
MCLEAN, VIRGINIA 22101
(703) 734-9730

DEVELOPER
CRAFTMARK HOMES
6020 ELM STREET, SUITE 102
MCLEAN, VIRGINIA 22101
(703) 830-0814

DESIGN BY:	SJT
DRAWN BY:	SJT
CHECKED BY:	PS
SCALE:	1"=60'
DATE:	JUNE 24, 2010
PROJECT #:	10-021
SHEET #:	1 OF 1

SALES TRAILER SITE LIME KILN VALLEY II LOT 10 LIME KILN ROAD

TAX MAPS 40 & 45 GRIDS 21 & 4
FIFTH ELECTION DISTRICT

PARCELS 114 & 12
HOWARD COUNTY, MARYLAND