

HOWARD COUNTY  
 PERMIT APPLICATION

PERMIT NUMBER

80600794

Building Address 15417 Maple Ridge Dr  
Woodbine Md 21797

Property Owner's Name Grant Xuguang  
 Address 15417 Maple Ridge Dr


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

City Woodbine State MD Zip Code 21797

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

Home Phone 410 48 9580 Work Phone \_\_\_\_\_  
 if other than stated hereon):

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

 Karen Hurley-Klayman  
 293 Southland Ct.  
 Dunkirk, MD 20754-9600 410 507 7705

Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Existing Use \_\_\_\_\_

Cc \_\_\_\_\_

Proposed Use SFD

Cc **ANTHONY & SYLVAN POOLS**

Estimated Construction Cost \$ 30000

556-E Ritchie Highway

Description of Work 18x43 inground pool,  
3' to 8' depth, filled by truck, fence  
to code by owner

Severna Park, Md. 21146

410-544-6084

M.H.I.C. 19347

Occupant or Tenant \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_

Contact Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

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: <u>N/A</u> <input type="checkbox"/> _____ Full _____ Partial _____ Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ _____ Public _____ Private
1st floor: _____	Sewage Disposal: _____ _____ Public _____ Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Height: _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> _____ NFPA #13D _____ NFPA #13R _____ Other:
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ _____ 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 THERE TO; (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.

Karen Klayman  
 Applicant's Signature

Karen Klayman  
 Print Name

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

6/29/06  
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>6/29/06</u>	<u>[Signature]</u>
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		

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

CONTINGENCY CONSTRUCTION START:   
 ONE STOP SHOP:

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA  
 T:\Normal\PERMIT.FRM Rev. 11/4/04

RECEIVED JUL 03 2003

CA 7/3/03

X Tao

X Jim Han

APPROVED

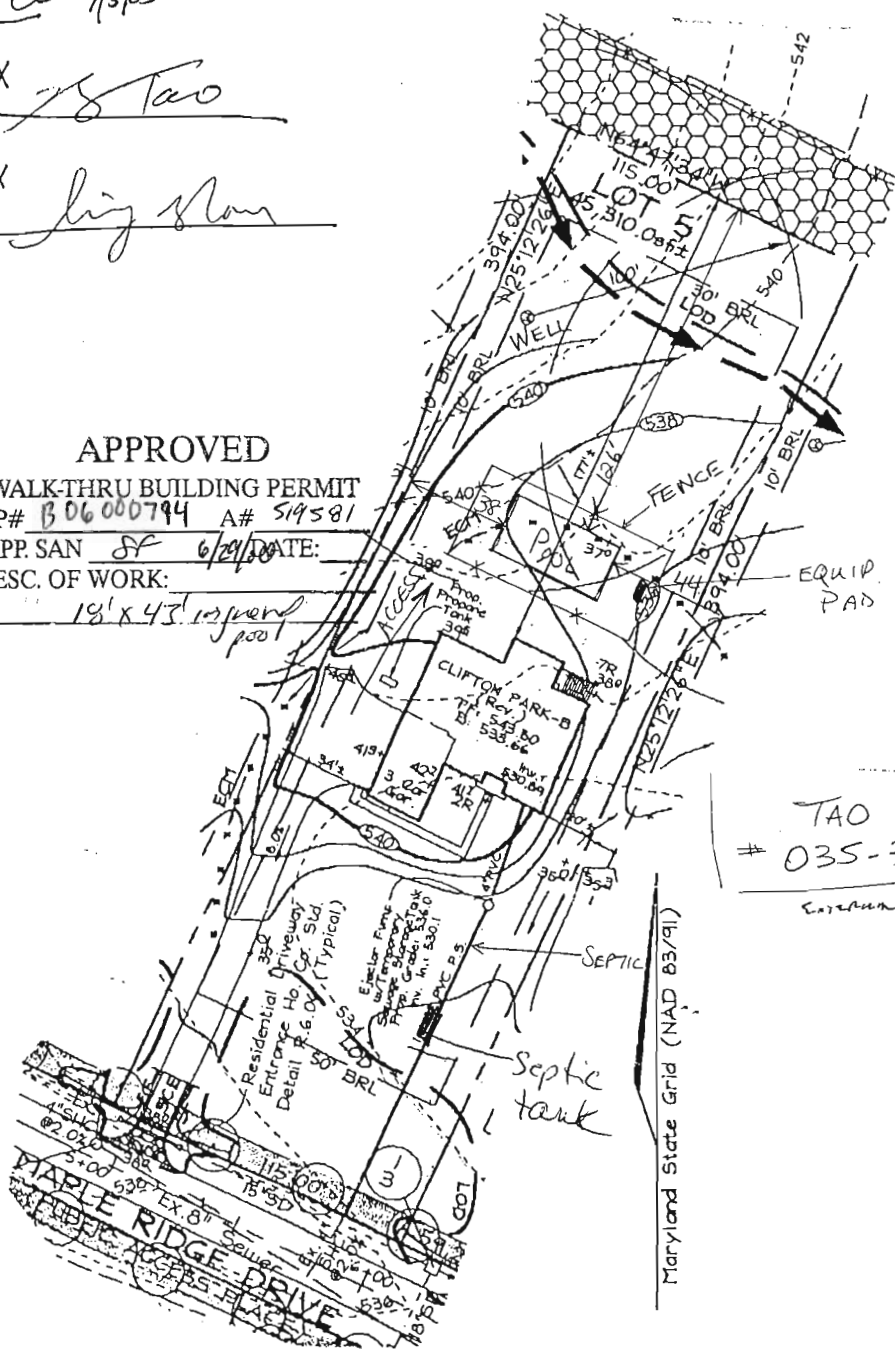
WALK-THRU BUILDING PERMIT

BP# B06000794 A# 519581

APP. SAN SF 6/29/00

DESC. OF WORK:

18' x 43' island pool



TAO  
# 035-356

### FSH Associates

Engineers Planners Surveyors  
8318 Forrest Street, Ellicott City, MD 21043  
Tel: 410-750-2261 Fax: 410-750-7350  
E-mail: FSHAssociates@cs.com

### OWNER/DEVELOPER

NV HOMES  
2200 Defense Highway, Suite 301  
Crofton, Maryland 21114  
301.858.0522

Note: See Approved Grading  
Plan GP-03-16 for Entire Site.

DESIGN BY: Slim  
DRAWN BY: Slim  
CHECKED BY: ZYF  
SCALE: 1"=50'  
DATE: July 03, 2003  
W.O. No.: 313B  
SHEET No.: 1 OF 1

## LOT RESITE LOT 5 MAPLE RIDGE

TAX MAP 8 GRID 12 & 20  
4TH ELECTION DISTRICT

PARCEL 51 & 37B  
HOWARD COUNTY, MARYLAND

GP-03-16

LAYOUT 11/7/03 - 1:30  
INSP 1 11/25/03 1:30 pm INSP 3 \_\_\_\_\_  
INSP 2 \_\_\_\_\_ INSP 4 \_\_\_\_\_

04-367146

INDEXED

ISSUE DATE: 9/18/03

P 519581

APPROVAL DATE: 11/25/03

**PERMIT**  
**SHARED SEPTIC SYSTEM**

A 510610-F

**HOUSE SEWER LINE CONNECTION**

**HOWARD COUNTY HEALTH DEPARTMENT**  
**BUREAU OF ENVIRONMENTAL HEALTH**

South Carroll Backhoe, Inc IS PERMITTED TO INSTALL  ALTER

ADDRESS: 4410 Salem Bottom Road (21157) PHONE NUMBER: 410-785-4197

SUBDIVISION Maple Ridge LOT NUMBER: 5

ADDRESS: 15417 Maple Ridge Drive PROPERTY OWNER: NVR, Inc.

NUMBER OF BEDROOMS: 4

HOUSE SERVED BY PUBLIC WATER? YES OR (NO)

LOCATION:	Install 4" house sewer line connection per the approved site plan.
NOTES:	This permit is limited to the installation of the individual house sewer line connection and installation of a grinder pump, if applicable. The Howard County Bureau of Utilities must also be contacted for scheduling of inspection of these items at 410-313-4900.

PLANS APPROVED: (TAB) DATE: \_\_\_\_\_

**PERMIT VOID AFTER 2 YEARS**

1. CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS.
2. ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED.
3. MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED.
4. CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT.
5. NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
6. PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

**BUILDING PERMIT SIGNED AND RETURNED**  
CALL 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM  
**BUILDING PERMIT SIGNED AND RETURNED**

10/11/03 800144344 - PROPANE TANK  
8/11/05 800155435 - DECK

6/21/06 806000784 - 18x43 - inground pool

AST0610-F