

B11000265

Building Address: 12830 Lime Kiln Road

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

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: _____

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: _____

Proposed Use: _____

Estimated Construction Cost: \$ _____

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: NVR Inc

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:	<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:	<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 _____

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	8-2-11	Dana Bernard
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	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

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:

B11000970

Building Address: 12830 Lime kiln Rd Highland md 20777
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Lime kiln Valley
 Section: _____ Area: _____ Lot: 36
 Tax Map: 40/45 Parcel: 114/12 Grid: 21/4
 Zoning: _____ Map Coordinates: _____ Lot Size: 3.0108 (A)
 Existing Use: SFD
 Proposed Use: SFD
 Estimated Construction Cost: \$ 6000
 Description of Work:
Install 500 gal in ground propane tank
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: owner
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Maple Estates LC
 Address: 5074 Dorsey Hall Dr. St. 205
 City: Ellicott City State: MD Zip Code: 21042
 Home Phone: _____ Work Phone: _____
 Applicant's Name & Mailing Address, (If other than stated herein):
Jeremy Clancy 7051 Macbeth Way
Eldersburg md 21784
 Phone: 410-443-340-1299 Fax: 410-795-4572
 Email: Applied and Approved @ 44400.com
 Contractor Company: Valley National gas
 Contact Person: William Grewig
 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: _____
 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
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<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

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Basement:	<input type="checkbox"/> Public
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<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
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No. of 2 BR units:	
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Applicant's Signature: [Signature] Print Name: Jeremy Clancy
 Email Address: Applied and Approved @ 44400.com Date: 4/4/11
 Title/Company: permits

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

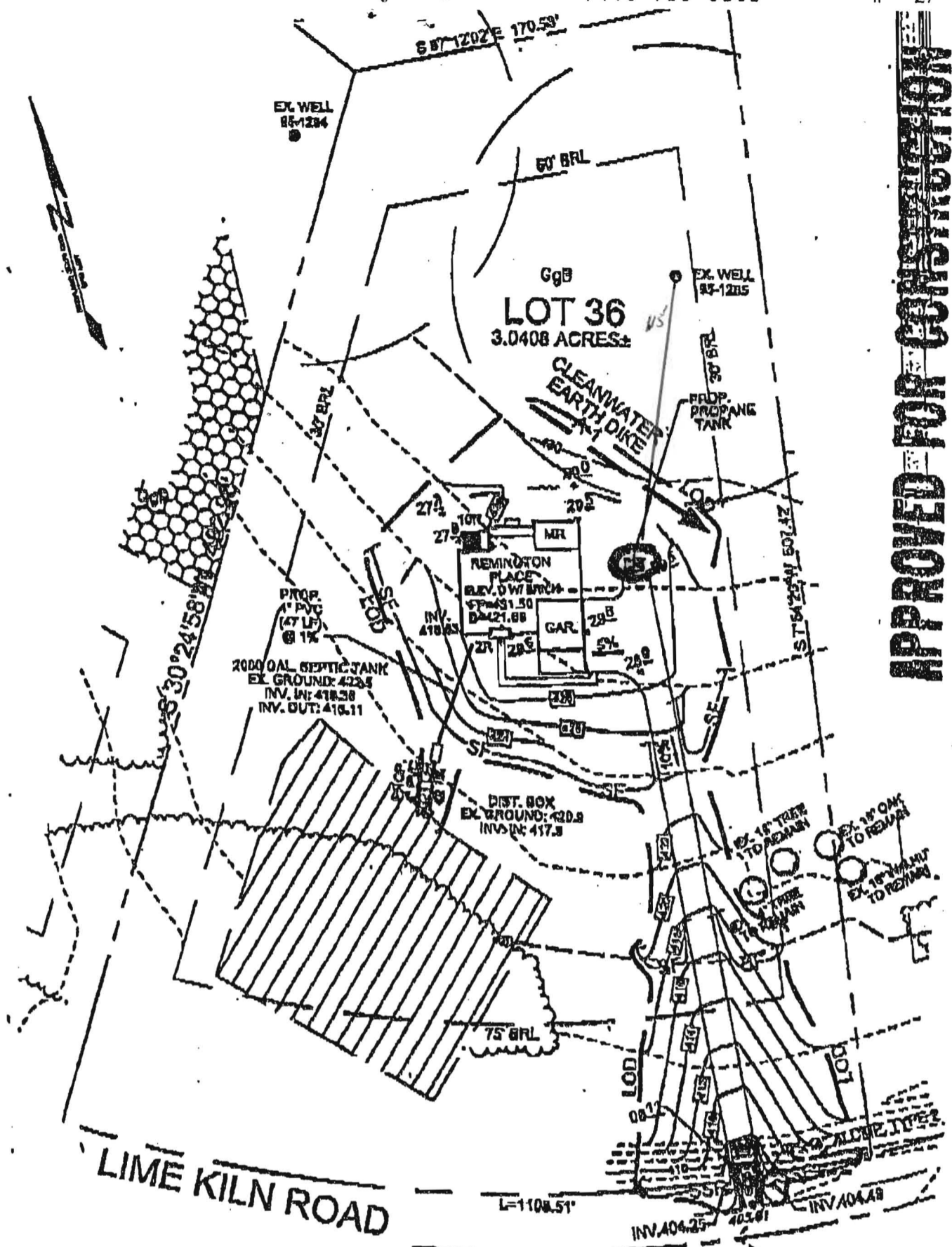
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>4/18/11</u>	<u>[Signature]</u>
Fire Protection		

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	\$

CU# 2373



APPROVED FOR CONSTRUCTION

LIME KILN ROAD

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
 8285 MARYHALL DRIVE, SUITE 100
 ELSPRING, MARYLAND 21078
 (410) 379-0808

OWNER
 MAPLE ESTATES, LC
 8870 BELM STREET, SUITE 200
 MCLAN, VIRGINIA 22101
 (703) 284-9720

- NOTE:
- 1) STORMWATER MANAGEMENT FOR THE HOUSE AND DRIVEWAY WILL BE TREATED BY THE EXISTING MICRO-PPOOL FACILITY.
 - 2) THE EXISTING WELL SHOWN ON THIS PLAN (40-85-1285) HAS BEEN LOCATED BY SILL ADCOCK & ASSOCIATES, LLC AND IS ACCURATELY SHOWN.
 - 3) DISTURBED AREA = 32,582 SQ. FT.
 - 4) DRIVEWAY AREA = 4,151 SQ. FT.

DESIGN BY:	JJT
DRAWN BY:	JJT
CHECKED BY:	PS
SCALE:	1"=60'
DATE:	JANUARY 13, 2011
PROJECT #:	10-047
SHEET #:	1 OF 1

HOUSE SITE
LIME KILN VALLEY · II

LOT 36
 12830 LIME KILN ROAD
 Highland, MD 20777

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

PARCELS 114 & 12
 HOWARD COUNTY, MARYLAND
 Apr. 1, 2011 - 9:30AM

010 No. 11/11/11 11/11/11 11/11/11

March 1, 2011

**Howard County Environmental Health Department
Well & Septic Program**

7178 Columbia Gateway Drive
Columbia, Maryland 21046
Attn: Ms. Dana Bernard

Re: Lime Kiln Valley II, Lot 36
12830 Lime Kiln Road
Building Permit #B11000265

Dear Ms. Bernard:

We are enclosing one (1) copy of the revised House Site for the above referenced lot for your review. Please note that the well box has been shown as requested. The percolations holes have not been shown on the house site, since it is not typically required.

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 Tuite, RLA, PE, LEED AP

cc: Ryan Johnson, NV Homes



Howard County
Health Department

7178 Columbia Gateway Drive, Columbia MD 21046

Phone (410) 313-2640

Fax (410) 313-2648

TDD (410) 313-2323

Toll Free 1-866-313-6300

Website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

DATE: February 1, 2011

RE: **Building Permit # B11000265**
12830 Lime Kiln Road
Highland, Maryland 20777
Building Site Plan

TO: NV Homes Inc.
c/o Jim Kerwin
6085 Marshalee Drive, Suite 130
Elkridge, Maryland 21075

Prior to building permit approval, an approved Building Plan is required. Further review is contingent upon submission of a Building Plan showing the following:

- Well must be shown on Building Plan. Show three (3) well sites, one existing and two replacements or approximately 1500 square feet of approvable well area for the lot. Wells should be 50 feet apart on lot. Well location and setbacks required are 30 feet from new foundation and 100 feet from septic tank, system and easement. Well tag numbers for existing well must be included.
- Percolation holes must be labeled along with elevations and shown on plan.

Your building permit will be placed "on hold" until all Health Dept. requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,

Dana Bernard, REHS/RS
Bureau of Environmental Health
Well and Septic Program
Phone (410) 313-2775
E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file