

PERMIT NUMBER: B 20602688

DATE ACCEPTED:

JUN 30 2020

LICENSES & PERMITS DIVISION



RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4
www.howardcountymd.gov

BUILDING SITE ADDRESS REQUIRED

Street Address: 15641 LINDEN GROVE LN
City: WOODBINE State: MD Zip Code: 21765
Subdivision/Village/Complex Name: LINDEN GROVE SDP/WP/BA #:
Lot: 9 Tax Map: 8 Parcel: 5 Grading Permit #: F PLAN 18-092

DESCRIPTION OF WORK REQUIRED

Existing Use: vacant Proposed Use: sfd Estimated Cost: \$250k
Trade Work to Be Completed (Separate Permits Required): Mechanical (HVACR) Electrical Plumbing None
NEW 2 STORY SINGLE FAM DWELLING FULL FIN BASEMENT ATTACHED 2 CAR GARAGE WITH ADDITIONAL ATTACHED 2 CAR GAR
LUXURY OUTDOOR LIVING SPACE FULL FRONT PORCH

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): TOLL BROTHERS INC Primary Residence: Yes No
Owner's Street Address: 7164 COLUMBIA GATEWAY DR
City: COLUMBIA State: MD Zip Code: 21046
Phone: 240-418-3846 Email:

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: TERRI MCNICHOLAS PERMITS PLUS, INC. Contact Name: TERRI MCNICHOLAS
Street Address: 487 KENORA DRIVE
City: MILLERSVILLE State: MD Zip Code: 21108
Phone: 443-271-1528 Email: TERRIPERMITS@YAHOO.COM

CONTRACTOR INFORMATION REQUIRED

Business Name: TOLL MID -ATLANTIC LP COMPANY INC
Licensee's Name: TOLL MID-ATLANTIC LP COMPANY INC. License #: 8220
Street Address: 7164 COLUMBIA GATEWAY DRIVE STE 230
City: COLUMBIA State: MD Zip Code: 21046
Phone: 240-418-3846 Email: PCLIFFORD@TOLLBROTHERS.COM

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: ESE CONSULTANTS TOLL ARCH Name:
Street Address: 7164 COLUMBIA GATEWAY DRIVE
City: COLUMBIA State: MD Zip Code: 21046
Phone: 410-872-9105 Email:

BUILDING CHARACTERISTICS REQUIRED

Primary Structure: SF Dwelling SF Townhouse SF Duplex Mobile Home Multi-Family Dwelling (MF*) Condo: Yes No
Utilities: Electric Gas Water Supply: Public Private (Well) Sewage Disposal: Public Private (Septic)
Heating System: Electric Natural Gas Propane Other: Roadside Tree Project: No Yes: #
Sprinkler System: NFPA 13 NFPA 13R NFPA 13D None Fire Alarm System: Yes No Voice Evac

ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options: RIDGEVIEW SITE SPECIFIC 13 RMS 5 FULL BATH 1 1/2 BATH 5 BEDROOM
of Bedrooms (SF): 5 # of efficiency units (MF*): # of 1 BR (MF*): # of 2 BR (MF*): # of 3 BR (MF*):
Rooms: 13 # Full Baths: 5 # Half Baths: 1 # Fireplaces: 1
Garage/Carport Info: Attached Garage Detached Garage Integral Garage Carport None
Basement/Foundation Info: Slab on Grade Post & Pier Unfinished Basement Finished Basement: Full or Partial
1st Fl Width: 64 1st Fl Depth: 58 2nd Fl Width: 64 2nd Fl Depth: 59 Bsmt Width: 64 Bsmt Depth: 58
Energy Method: Prescriptive Performance UA Alternative ERI Gross Area: 9402 sq ft Occupiable Area: 9402 sq ft

AGREEMENT/ DISCALIMER REQUIRED

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 ORIGINAL SIGNATURE DATE SIGNED 6/30/20

FOR OFFICE USE ONLY CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS: PR DPZ DED Health SHA CID
SUBMITTAL FEES: PAYMENT: ACCEPTED BY: PROPOX

**COMPLETE THIS FORM WHEN DROPPING-OFF ANY
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:**

Date: 7-9-20

To: Environmental Health
(Person's Name and Division)

From: TERRI McNICHOLAS (443) 271 1528
(Your Name, Company Name and Telephone Number)

Subject: Project name Lot 9 Linden Grove
Project site address 15641 Linden Grove LP
Permit # B200002088 SDP # F-plan
Other information pertinent to this project _____

Please check the attachments below that you are submitting with this transmittal:

- Letter of response to address plan review comment letter
- Revised plans and/or revised details: When submitting for a complete re-review, **duplicate sets shall be submitted.**
- Letter Summarizing Changes
- Energy conservation calculations
- Copies of Flood-Plans (be specific).
- Health Department Request DPZ/ DED Request Applicant's Request
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____
- Other ** See Email from Dep of Ins, Lic & Per. Stating Health Dep

Contact Person Information: (Required)

TERRI McNICHOLAS Permits Plus
Please Print Name Inc

Telephone No:

443-271 1528

E-Mail Address:

Terripermits@yahoo.com

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

Received by DROPBOX

3RD SET OF
PLANS FOR
HEALTH

RIDGEVIEW

15641 Linden Grove Ln
Woodbine MD 21765
LOT 9

BASEMENT

64X58 OVERALL
2 ROOMS 1 FULL BATH
1221 FIN SQ FT 899 UNFIN SPACE

1ST FLOOR

64X58 OVER ALL
4 ROOMS 1.5 BATHS
2968 FIN SPACE

GARAGE 1 22X23=506
GARAGE 2 22X22 = 484

REAR PORCH 16X20=320
FRONT PORCH 28X12=336

2ND FLOOR

64X59 OVER ALL
7 ROOMS 3 BATHS
2508 FIN SPACE
160 UN FIN SPACE

9402 TOTAL SQ FT FINISHED+UNFINISHED



HOWARD COUNTY
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE - ELLICOTT CITY, MD 21043
*** THIS PERMIT MUST BE CONSPICUOUSLY POSTED ON SITE ***

Residential New Single Family Dwelling Permit

PERMIT NUMBER: B20002088

APPLICATION DATE: 6/30/2020

ISSUE DATE: 10/26/2020

SITE ADDRESS:

15641 LINDEN GROVE LN
WOODBINE, MD 21797

PROPERTY OWNER INFO:

TOLL BROTHERS INC
7164 COLUMBIA GATEWAY DRIVE
COLUMBIA, MD 21046
Phone #: 240-418-3846

Subdivision: Linden Grove

Lot No.: 9

Tax Map: 7

Grid: 7-18

ADC Map: 4691-K8

SDP No.:

Zoning: RC-DEO

Census Tract: 604001

DESCRIPTION OF WORK:

SFD/ MODEL 'RIDGEVIEW', 2 STORY, FULL BASEMENT, BASEMENT = FULL FINISHED, 13R, 5FB, 1HB, 1FP, ATTACHED GARAGE, 5BR, N/A, ENERGY METHOD = PERFORMANCE METHOD, SUBJECT TO CB-76-2018.

PRIMARY CONTRACTOR INFO:

Contractor License No.: 8220

License Address: TOLL MID-ATLANTIC LP COMPANY INC
NATHAN BRANDENBURG

Phone #: 7164 COLUMBIA GATEWAY DRIVE SUITE
230
COLUMBIA, MD 21046
410-872-9105

PRIMARY CONTACT INFO:

Contact Type: CONTACT
PERMITS PLUS INC

487 KENORA DRIVE
MILLERSVILLE, MD 21108

Phone #: 443-271-1528

Building/Lot Characteristics

Legal Description:

Existing Use: Vacant Lot

Water Supply: Private

Height: 28

Sewage Disposal: Private

Basement: Full Finished

SF # of Bedrooms: 5

SF # of Full Baths: 5

SF # of Half Baths: 1

Zoning Setback Requirements:

Front - Proposed: n/a **Required:** 50

Rear - Proposed: n/a **Required:** 30

Side - Proposed: n/a **Required:** 10

Side Street - Proposed: n/a **Required:** n/a

Meets Minimum Required Setbacks?: Yes

Lot Coverage for NT Zoning:

Permit Fees:

Total Fees Invoiced: \$50,736.01

Total Fees Paid: \$50,736.01

Balance Due: \$0.00

To schedule an inspection or check the results of an inspection please call (410) 313-3800

APPROVED BY THE DIRECTOR OF INSPECTIONS, LICENSES AND PERMITS - BUILDING OFFICIAL

Menu Save Reset Cancel Help

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Tanks	B20003933	11/12/2020
Description of Work		
SFD/ INSTALL (1) 1,000 GALLON UNDERGROUND PROPANE TANK		

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
15641	LINDEN GROVE	LN	
Unit Type	Unit #	X Coordinate	Y Coordinate
--Select--		-77.06758	39.32733
City	State	Zip Code	Primary
WOODBINE	MD	21797	Yes

Approved 11/17/20

Parcel * (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
11059843	0005	0	0	0	0	RURAL
Legal Description						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
18	9	604001	5				

Plan Area	State Tax Id	Subdivision Name	
		Linden Grove	
Section	Area	Tax Map	
		7	
Grid	Zoning District	ADC Map	
7-18	RC-DEO	4691-K8	
SDP No.	Final Plan No.	WP File No.	
	ECP-17-019		
Record Plat No.	WS Contract No.	FDP No.	Primary
25064-2507			Yes
Owner Occupied	Year Built	Historic District	
<input type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	
Historic District Registry No.	Stat Area	Flood Plain	
	4-05	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Building No			

Owner * (This section is required.)

Search Reset Clear

Name *
 TOLL MID ATLANTIC LP COMPANY INC

Address Line 1
 250 GIBRALTAR RD

Address Line 2

Address Line 3

Mail City	Mail State	Mail Zip Code
HORSHAM	PA <input type="checkbox"/>	19044

Phone	Primary
301-725-3232	Yes <input checked="" type="checkbox"/>

E-mail

Cell Number	Fax Number
_____	_____

Professionals (This section is not required.)

Search Reset Clear

License # *	Business Name		
20100103851	THE H.J. POIST GAS COMPANY, INC		
License Type *	First Name	Middle Name	Last Name
Propane Gs <input checked="" type="checkbox"/>	SEAN	MICHAEL	UNDERWOOD
Primary	Address Line 1		
Yes <input checked="" type="checkbox"/>	360 MAIN STREET		
	Address Line 2		

	City	State	ZIP Code
	LAUREL	MD	20707-0000
	Phone 1	Phone 2	Fax
	4434149582	_____	_____
	E-mail		

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type *	First Name	MI	Last Name
Applicant <input checked="" type="checkbox"/>	MICHELLE		CLANCY
Relationship	Full Name		
Applicant <input checked="" type="checkbox"/>	MICHELLE CLANCY		
Primary	Organization Name		
Yes <input checked="" type="checkbox"/>	APPLIED & APPROVED PERMITS LLC		
	Street Address		
	P.O. BOX 310		
	Address Line 2		

	City	State	Zip Code
	PERRY HALL	MD <input type="checkbox"/>	21128
	Phone	Cell	Fax
	443-340-1229	_____	_____
	E-mail *		

MICHELLE@APPLIEDANDAPPROVED.COM

Addtl Info

Est Construction Cost *	Housing Units *	Number of Buildings *	Public Owned
3000	0	0	No
Construction Type			
329 - Structures Other Than Buildings (Retaining Walls/Tents)			

TANK INFORMATION

RESIDENTIAL TANK INFORMATION

Capital Project-No Fee *	Capital Project Number	Fee Exempt *	Roadside Tree Project Permit *	Roadside Tree Permit #
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Existing Use	Number of Tanks Installed *	Number of Tanks Removed *		
SFD	1	0		
Water Supply	Sewage Disposal	Expiration Date	Relocate Existing Tank *	
Private	Private	5/14/2021	0	

PAYMENT INFORMATION

Check 1	Payee 1	Check 2	Payee 2	SAP Doc No	SAP Entered

Related Records

1

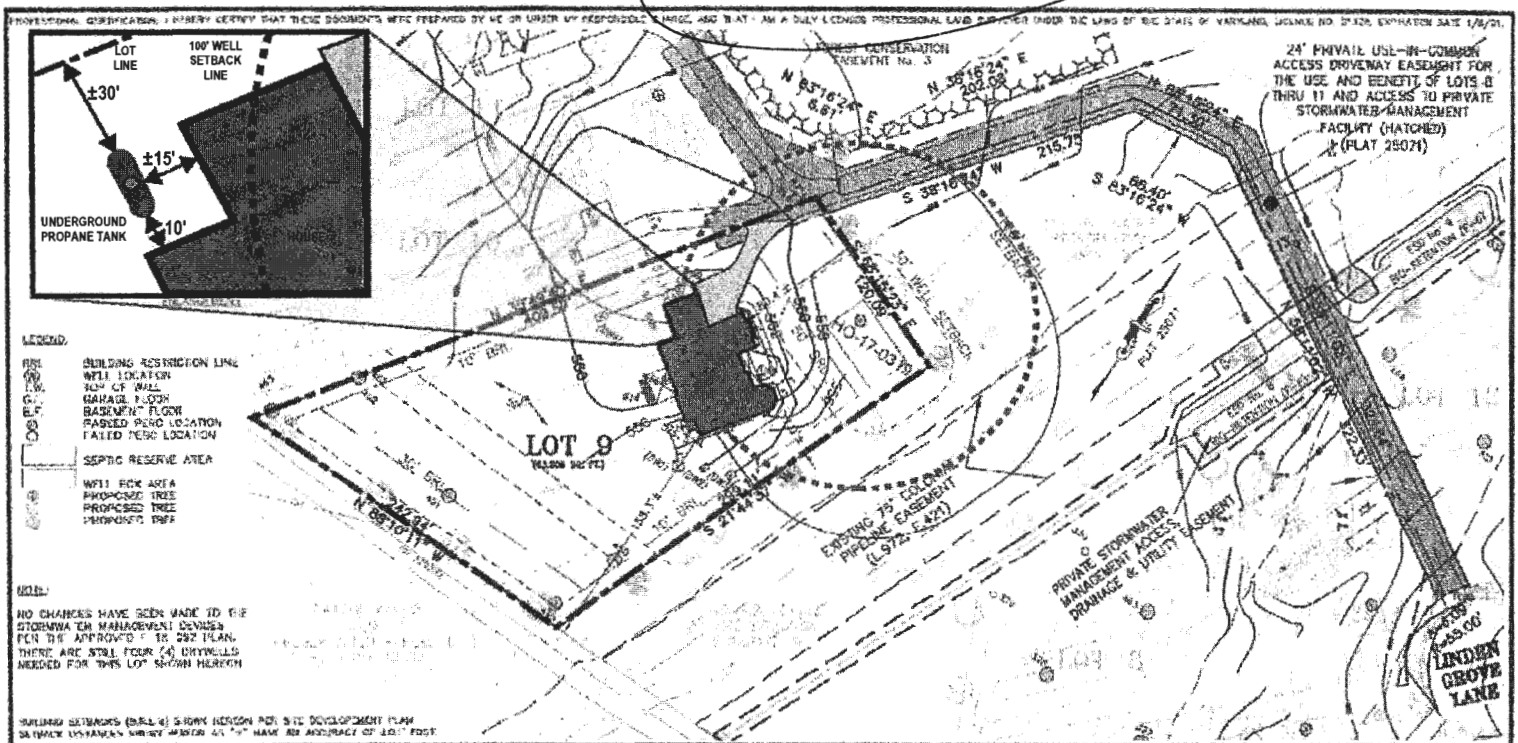
Permit Number	Record Type Alias	Status	Number	Street Name	Opened Date	Descripti
B20002088	Residential New Single Family Dwelling Permit	Issued	15641	LINDEN GROVE	06/30/2020	SFD/ MO
P20004081	Residential New Plumbing Permit	Issued	15641	LINDEN GROVE	10/26/2020	NEW SFI
B20003933	Residential Tank Permit	Pending Review	15641	LINDEN GROVE	11/12/2020	SFD/ INS

1

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Submit Cancel

Approved for LP tank
B20003733
ATT 11/17/20



HOUSE TYPE: INDIVIDUAL (COURTNEY)

TWO CAR GARAGE WITH GARAGE CONVERSION

FINISHED LOWER LEVEL

DAYLIGHT BASEMENT

ADD 1" TO FRONT OF BASEMENT FOUNDATION WALLS

ADDITIONAL POWER ROOM

OPTIONAL BATH FOR FINISHED LOWER LEVEL

ADD 1/2" CAR FRONT STREET GARAGE

QUALITY OUTDOOR LIVING SPACE

NET DASH FOR FINISHED LOWER LEVEL

BATH ROOM FOR FINISHED LOWER LEVEL

WELL NUMBER: MD-17-0790

ADDRESS: 15641 LINDEN GROVE LANE WOODBINE, MD 21797

15641 LINDEN GROVE LANE
WOODBINE, MD 21797
LOT 9
LINDEN GROVE

PLAN SHOWING THE UNDERGROUND
1,000-GALLON PROPANE STORAGE
TANK LOCATION

ESE CONSULTANTS
ENGINEERING • PLANNING • SURVEYING • ENVIRONMENT

ESE Consultants, Inc.
7164 Columbia Gateway Drive • Suite 230 • Columbia, MD 21048
TEL 410-872-9705

DATE: 09/28/2020 SCALE: 1" = 60'
CHK'D: M.J.B. JOB NO: 0005
FILE: 17 LOT 9 - RESURVEY LCR
DRAWN: S.C.R.