



Building Permit Application

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

Date Received: _____

Permit No.: _____

Building Address: 7202 Mink Hollow Rd
 City: Highland State: MD Zip Code: 20777
 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: \$ 46,000.00
 Description of Work: Swimming pool, Fiberglass 38x16 Rectangular Blue Skins, 2 main drains, 3 jets
 Occupant or Tenant: 3 Adults
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Charles Deany
 Address: 7202 Mink Hollow Rd
 City: Highland State: MD Zip Code: 20777
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: Pelno Design Build
 Contact Person: LARRY RUGEN
 Address: P.O. Box 1668
 City: Middletown State: MD Zip Code: 20777
 License No.: 48118
 Phone: 301-249-9000 Fax: _____
 Email: Calinw@pelno.com
270-372-4440

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

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
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 type="checkbox"/> No	
Gas: <input 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.

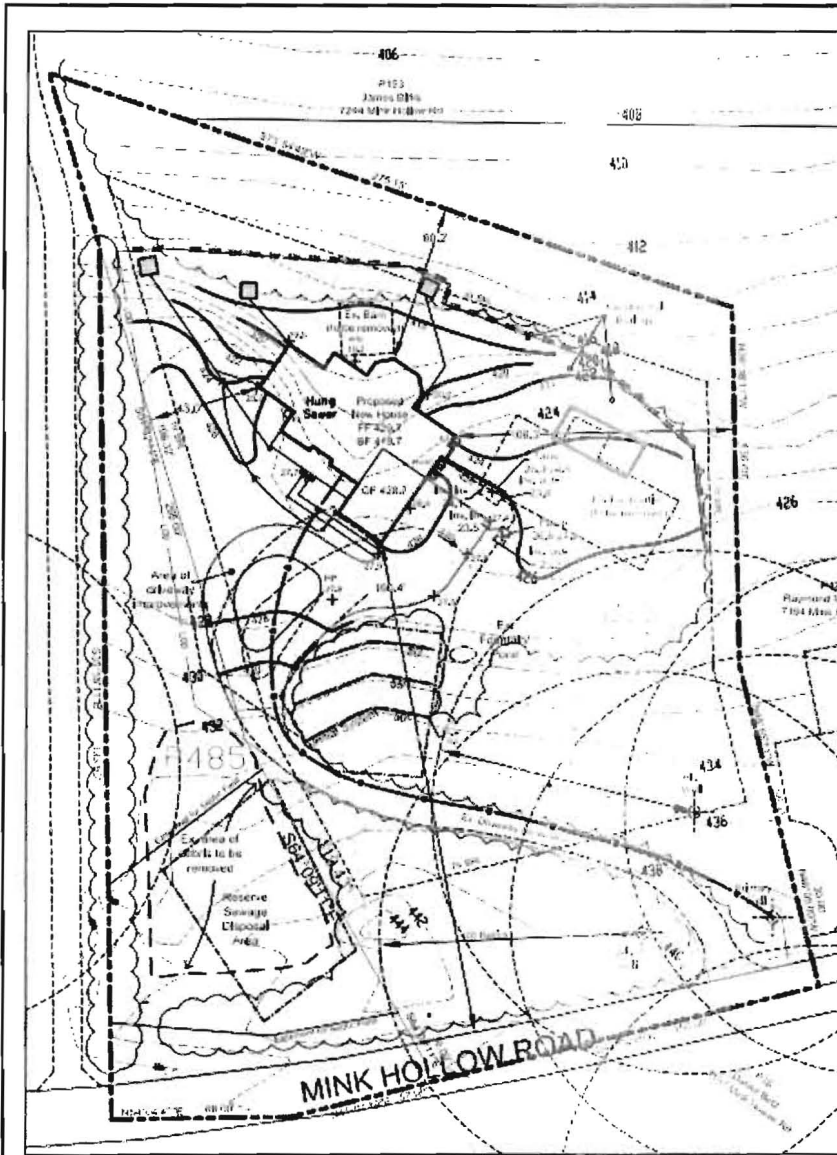
Applicant's Signature: [Signature] Print Name: Larry Rugen
 Email Address: Calinw@pelno.com Date: 5/17/2013
 Title/Company: Sales - Pelno Design Build

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>5/21/13</u>	<u>R. Buckner</u>

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	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

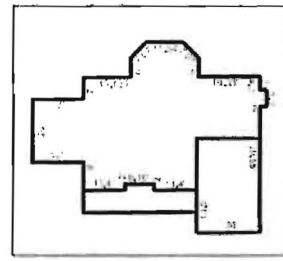


7,004 Sq. Ft. of Forest Clearing

SCALE: 1"=60'

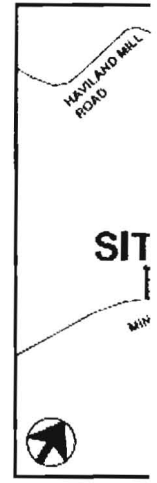
APPROVED WALK-THRU BUILDING PERMIT

BP# _____ DATE: 5/22/13
 APP. SAN _____
 DESC. OF WORK: pool



OWNER/APPLICANT:
 FARIAN & CHARLENE DEPRY
 3601 SILVER SPRUCE CIRCLE
 BURTONSVILLE, MD 20866
 240-505-4119

BUILDER:
 CLASSIC HOMES OF MARYLAND
 50 W. EDMONSTON DR
 ROCKVILLE, MD 20850
 301-251-2001



FORCE MAIN DESIGN NOTES-

1. Total Length of Force Main - 73.0'
2. Diameter of Force Main - 2"
3. Number of 45° Bends - 1
4. Number of 90° Bends - 0
5. Number of 22° Bends - 1
5. Number of Couplings Required - 4
6. Total Lift - 14.4' (Bottom of Pump 16.2' Inv. Beg. 30.6)
7. 4 x 2 Reducer to Couple Force Main and Trench
8. Friction Loss Calculations-
 - a) Static Head (Inverse Elev. (Trench Beg.) = 330.6 - (Pump Elev. = 316.2) = 14.4'
 - b) Friction Head -
 - Force main length: 73.0'
 - Couplings: 4 x 2' = 8'
 - 45° Ell: 1 x 4' = 4'
 - 90° Ell: 0 x 7' = 0'
 - 22° Ell: 1 x 2' = 2'
 - Total = 97.0'
 - 97.0 Lf. 2" PVC x 1.54 per 100 Lf. = 1.5'
 - c) Total Head = 15.9'
 - d) 15.9'(Head) @ 30 G.P.M. = Goulds Pump Model 3887 / WS07B, BF, 1 H.P. or Equivalent



DM
 4-13-12



Benning & Associates, Inc.
 Land Planning Consultants
 8933 Shady Grove Court
 Gaithersburg, MD 20878
 (301)418-0240

- LEGEND:**
- PROPOSED HOUSE
 - LIMIT OF DISTURBANCE
 - SUPER SILT FENCE
 - DRIVEWAY IMPROVEMENTS
 - EXISTING CONTOUR
 - PROPOSED CONTOUR
 - PROPOSED WELL
 - PROPOSED SEPTIC
 - TRFF REMOVAL



Building Permit Application

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

Date Received: _____

Permit No.: _____

Building Address: 7202 Mink Hollow Rd
 City: Highland State: MD Zip Code: 20777
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: 0000
 Section: _____ Area: 2 Lot: _____
 Tax Map: 0040 Parcel: 0216 Grid: 0007
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Fadian & Charlene Deprey
 Address: 7202 Mink Hollow Rd
 City: Highland State: MD Zip Code: 20777
 Phone: 240-505-4119 Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Edward Pacylowski
 Address: 13330 Clarksville Pike
 City: Highland State: MD Zip Code: 20777
 Phone: 301-854-0821 Fax: _____
 Email: _____

Existing Use: SF home
 Proposed Use: SF home w/ Deck
 Estimated Construction Cost: \$ 65,000
 Description of Work: Build approx 526sqft deck w/ 16 steps to grade w/ 8'x8' trellis

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

Contractor Company: Pro-Built Construction, Inc.
 Contact Person: Edward Pacylowski
 Address: 13330 Clarksville Pike
 City: Highland State: MD Zip Code: 20777
 License No.: 20247
 Phone: 301-854-0821 Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 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	
<u>Construction type:</u>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>	
<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: <u>Deck 526sqft</u>	
	Dimensions: <u>18x28</u>	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings: <u>concrete</u>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
<u>Roadside Tree Project Permit #</u>	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

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

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.

[Signature]
 Applicant's Signature

 Email Address

 Title/Company

Edward Pacylowski
 Print Name

December 19, 2012
 Date

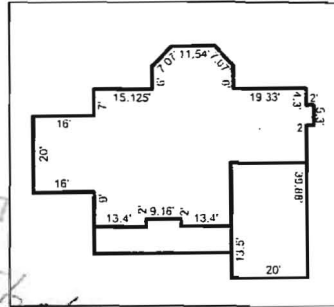
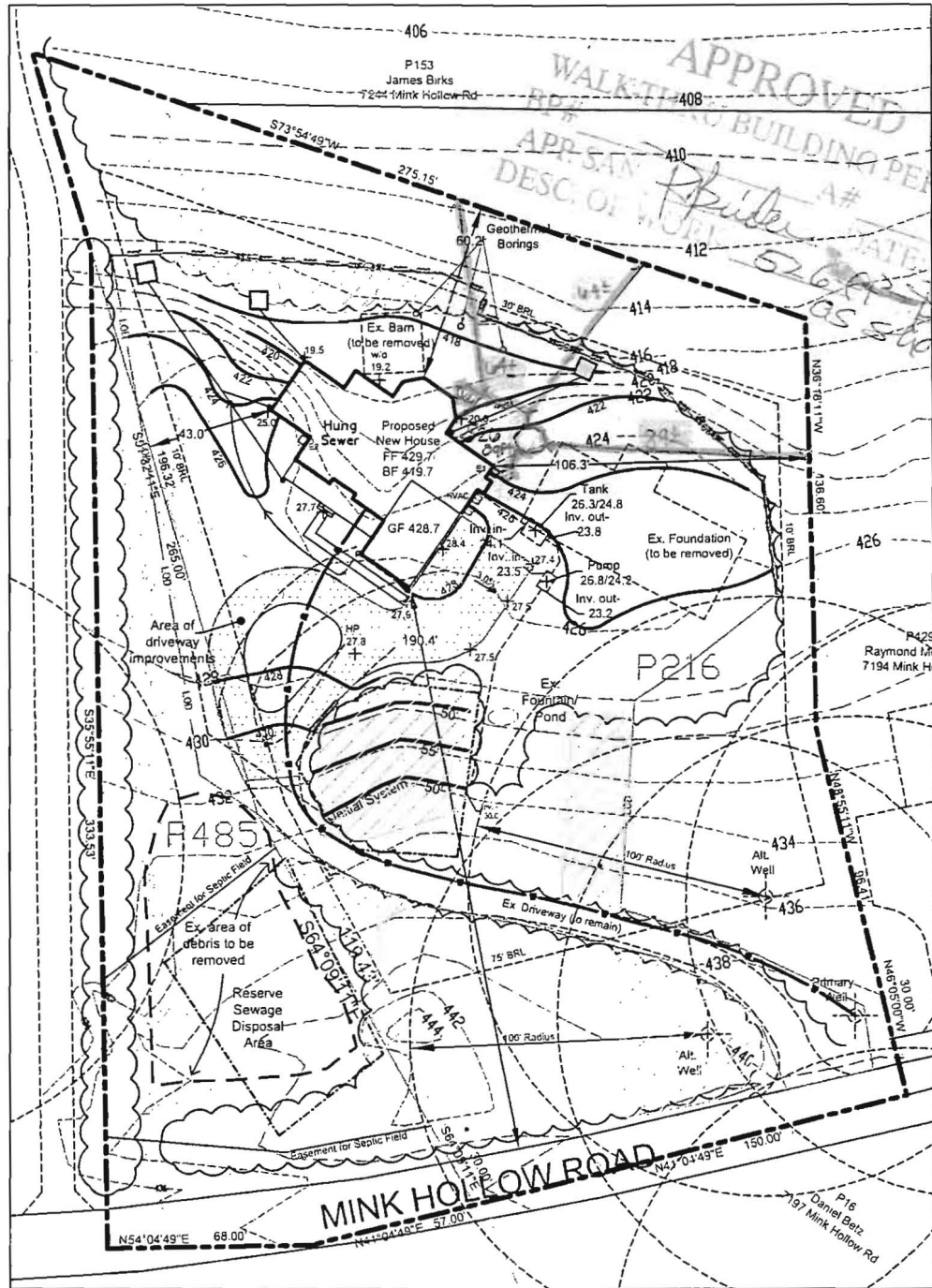
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>12/19/12</u>	<u>R. Bieker</u>

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

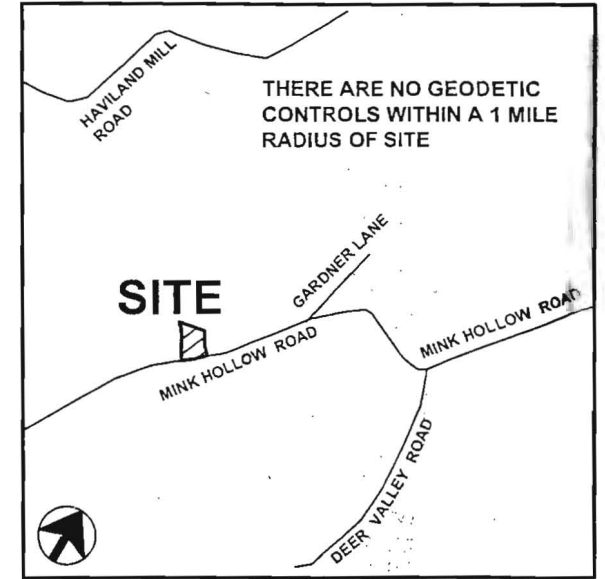
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot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

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



OWNER/APPLICANT:
 FABIAN & CHARLENE DEPRY
 3601 SILVER SPRUCE CIRCLE
 BURTONSVILLE, MD 20866
 240-505-4119

BUILDER:
 CLASSIC HOMES OF MARYLAND
 50 W. EDMONSTON DR
 ROCKVILLE, MD 20850
 301-251-2001



VICINITY MAP
 SCALE: 1" = 2,000'

FORCE MAIN DESIGN NOTES-

1. Total Length of Force Main - 73.0'
2. Diameter of Force Main - 2"
3. Number of 45° Bends - 1
4. Number of 90° Bends - 0
5. Number of 22° Bends - 1
6. Total Lift - 14.4' (Bottom of Pump 16.2/ Inv. Beg. 30.6)
7. 4 x 2 Reducer to Couple Force Main and Trench
8. Friction Loss Calculations-
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 - b) Friction Head -
 - Force main length: 73.0'
 - Couplings: 4 x 2' = 8'
 - 45° Ell: 1 x 4' = 4'
 - 90° Ell: 0 x 7' = 0'
 - 22° Ell: 1 x 2' = 2'
 - Total = 97.0'
 - 97.0 l.f. 2" PVC x 1.54 per 100 l.f. = 1.5'
 - c) Total Head = 15.9'
 - d) 15.9'(Head) @ 30 G.P.M. = Goulds Pump Model 3887 / WS07B, BF, 1 H.P. or Equivalent



Benning & Associates, Inc.
 Land Planning Consultants
 8933 Shady Grove Court
 Gaithersburg, MD 20877
 (301)948-0240

PLOT PLAN
 7202 MINK HOLLOW RD.
 Parcel 216 & 485
 Election District 05
 Tax Map 40
 Election District No. 05
 Howard County, Maryland
 Date: 04/13/12

LEGEND:

- PROPOSED HOUSE
- LIMIT OF DISTURBANCE
- SUPER SILT FENCE
- DRIVEWAY IMPROVEMENTS
- EXISTING CONTOUR
- PROPOSED CONTOUR
- PROPOSED WELL
- PROPOSED SEPTIC
- TREE REMOVAL

7,004 Sq. Ft. of Forest Clearing

SCALE: 1"=60'



DM
 4-13-12

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:

B/2000268

Building Address: 7202 MINK HOLLOW RD
HIGHLAND MD 20777

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

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: _____

Tax Map: 40 Parcel: 216 & 485 Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SINGLE FAMILY HOME

Proposed Use: SINGLE FAMILY HOME

Estimated Construction Cost: \$ 508,000

Description of Work: BUILD NEW FAMILY HOME

Occupant or Tenant: PROPERTY OWNER

Was tenant space previously occupied? Yes No

Contact Name: CHARLENE DEPRY

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: FABIAN & CHARLENE DEPRY

Address: 3601 SILVER SPRUCE CIR

City: BURTONSVILLE State: MD Zip Code: 20866

Home Phone: 301 637 2304 Work Phone: 240 505 4119

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

Phone: _____ Fax: _____

Email: charlene.depry@gmail.com

Contractor Company: CLASSIC HOMES OF MD

Contact Person: JIM DEAD

Address: 50 W EDMUNSTON DR SUITE 405

City: ROCKVILLE State: MD Zip Code: 20852

License No.: MHBR 5421 - BC 3900

Phone: 301 257 2001 ext 311

Email: jim@classic.md.net

Engineer/Architect Company: CLASSIC HOMES OF MD

Responsible Design Prof.: _____

Address: SEE ABOVE

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
> <u>Roadside Tree Project Permit</u>	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
Depth Width	<input type="checkbox"/> Public
1 st floor: <u>72' 63'</u>	<input checked="" type="checkbox"/> Private
2 nd floor: <u>56' 61'</u>	<u>Sewage Disposal</u>
Basement: <u>72' 35'</u>	<input type="checkbox"/> Public
<input checked="" 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: <u>4</u>	<input checked="" 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:	> <u>Roadside Tree Project Permit</u>
Roof:	<input type="checkbox"/> Yes <input checked="" 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: CHARLENE DEPRY
 Email Address: charlene.depry@gmail.com
 Title/Company: LAKE SIDE

Print Name: FABIAN DEPRY / CHARLENE DEPRY
 Date: 01/29/2012

RECEIVED
 JAN 30 2012

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>2-10-12</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? Yes No

Is Entrance Permit Required? Yes No

Historic District? Yes No

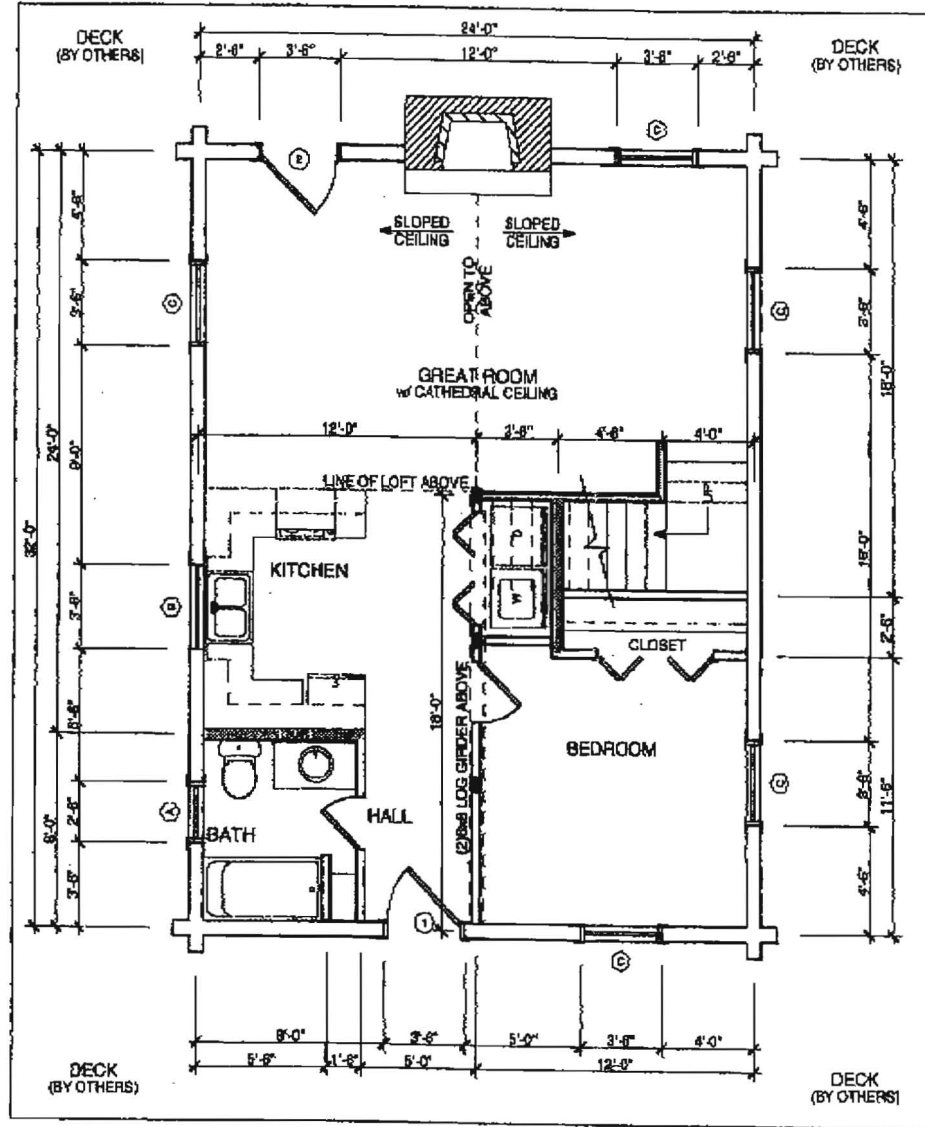
Lot Coverage for New Town Zone: _____

SDP/Red-line approval date: _____

LICENSES & PERMITS DIVISION

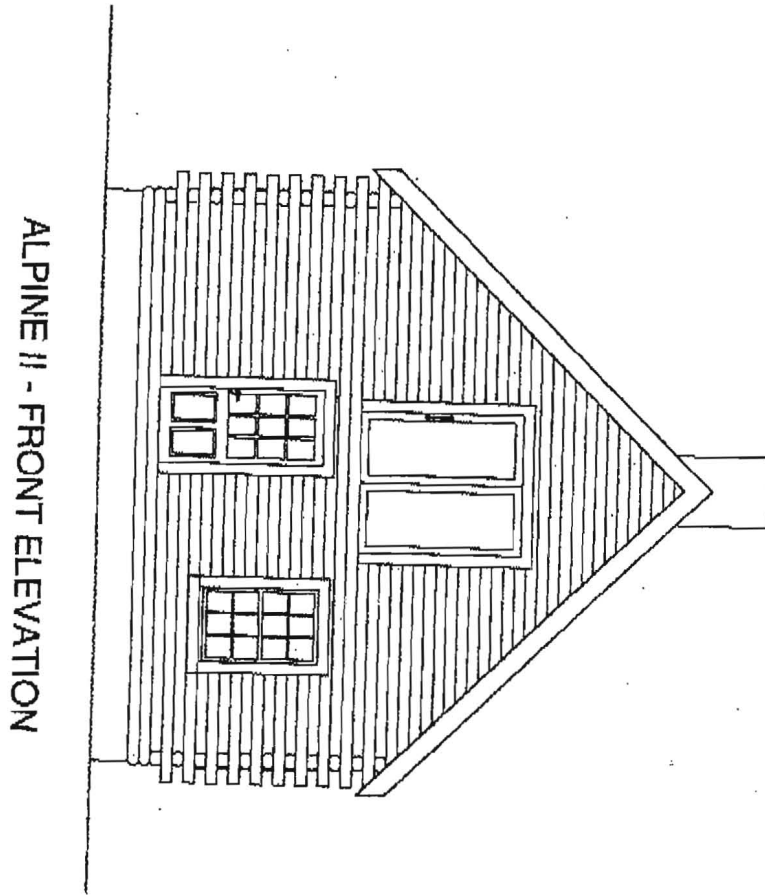
Filing Fee	\$ <u>150.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$

CK#384
 2/12/12

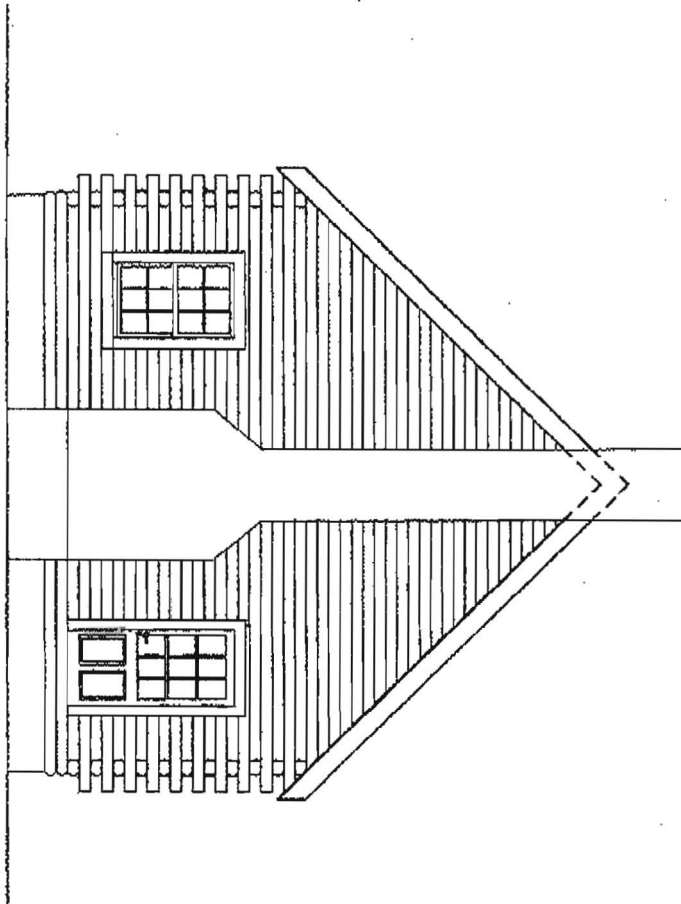


ALPINE II - FIRST FLOOR PLAN

SQUARE FOOTAGE (ANSI Z390-2003)	
HEATED AREAS:	
FIRST FLOOR	105 Sq. Ft.
STORAGE	331 Sq. Ft.
LOFT	114 Sq. Ft.
TOTAL HEATED	1870 Sq. Ft.
UNHEATED AREAS:	
STORAGE	0 Sq. Ft.
TOTAL UNHEATED	0 Sq. Ft.
TOTAL UNDER ROOF	1870 Sq. Ft.



ALPINE II - REAR ELEVATION



ALPINE II - LEFT ELEVATION

