



# 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: 2/28/13

Permit No.: B/3000695

Building Address: 1811 Boka Valley Ct  
City: Woodbine State: MD Zip Code: 21797  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: Boka Valley  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 81  
Tax Map: 08 Parcel: 43 Grid: 19  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 3.319A

Existing Use: Residential  
Proposed Use: Residential  
Estimated Construction Cost: \$ 250,000  
Description of Work: Addition - 1st story in-law suite and garage (2 BR, kitchen, rec room, 2 FB) deck  
Occupant or Tenant: Ambrose TO  
Was tenant space previously occupied?  Yes  No  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Property Owner's Name: AMBROS TO  
Address: 1811 Boka Valley Ct  
City: Woodbine State: MD Zip Code: 21797  
Phone: 443-956-7522 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein)  
Applicant's Name: James Pacylowski  
Address: 7255 Lake Hills Ct  
City: Marietta State: MD Zip Code: 21104  
Phone: 443-864-6487 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Contractor Company: Mind Full Innovations LLC  
Contact Person: James Pacylowski  
Address: 7255 Lake Hills Ct  
City: Marietta State: MD Zip Code: 21104  
License No.: 102113  
Phone: 443-864-6487 Fax: \_\_\_\_\_  
Email: James @ Mind Full Innovations LLC .com

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 <sup>st</sup> floor: <u>75' x 59'</u>
Area of construction (sq. ft.): _____	2 <sup>nd</sup> floor: _____
Use group: <u>2100 SQ FT</u>	Basement: _____
Construction type: _____	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input checked="" type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Wood Frame	No. of Bedrooms: _____
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>
<input type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units: _____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units: _____
Roadside Tree Project Permit # _____	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
	Footings: _____
	Roof: _____
	<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input checked="" 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 checked="" type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
<u>Sprinkler System:</u>
<input type="checkbox"/> Yes <input checked="" 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 HIS 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: James Pacylowski  
Email Address: James @ Mind Full Innovations LLC .com  
Date: 2-28-2013  
Title/Company: Owner

RECEIVED  
FEB 28 2013  
LICENSES & PERMITS DIVISION

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>4-9-13</u>	<u>Dana Bernick</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	\$ <u>25</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check #	<u>1174</u>

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



Office of the Health Officer  
7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
Main: 410-313-6300 | Fax: 410-313-6303  
TDD 410-313-2323 | Toll Free 1-866-313-6300  
[www.hchealth.org](http://www.hchealth.org)  
Facebook: [www.facebook.com/hocohealth](http://www.facebook.com/hocohealth)  
Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Acting Health Officer

DATE: March 14, 2013

TO: JAMES PACYLOWSKI

Via-e-mail: [JAMES@MINDFULLINNOVATIONSLLC.COM](mailto:JAMES@MINDFULLINNOVATIONSLLC.COM)

RE: **Building Permit # B13000695**  
**1811 Boka Valley Court**  
**Woodbine, Maryland 21797**

Mr. Pacylowski,

Further review is contingent upon submission of a revised building plan showing the following:

- Floor plans for the proposed addition.
- Floor plans for existing house.

Your building permit will be placed "on hold" until all Health Department 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,

A handwritten signature in cursive script that reads 'Dana Bernard'.

Dana Bernard, REHS/RS

Environmental Specialist II

Bureau of Environmental Health

Well and Septic Program

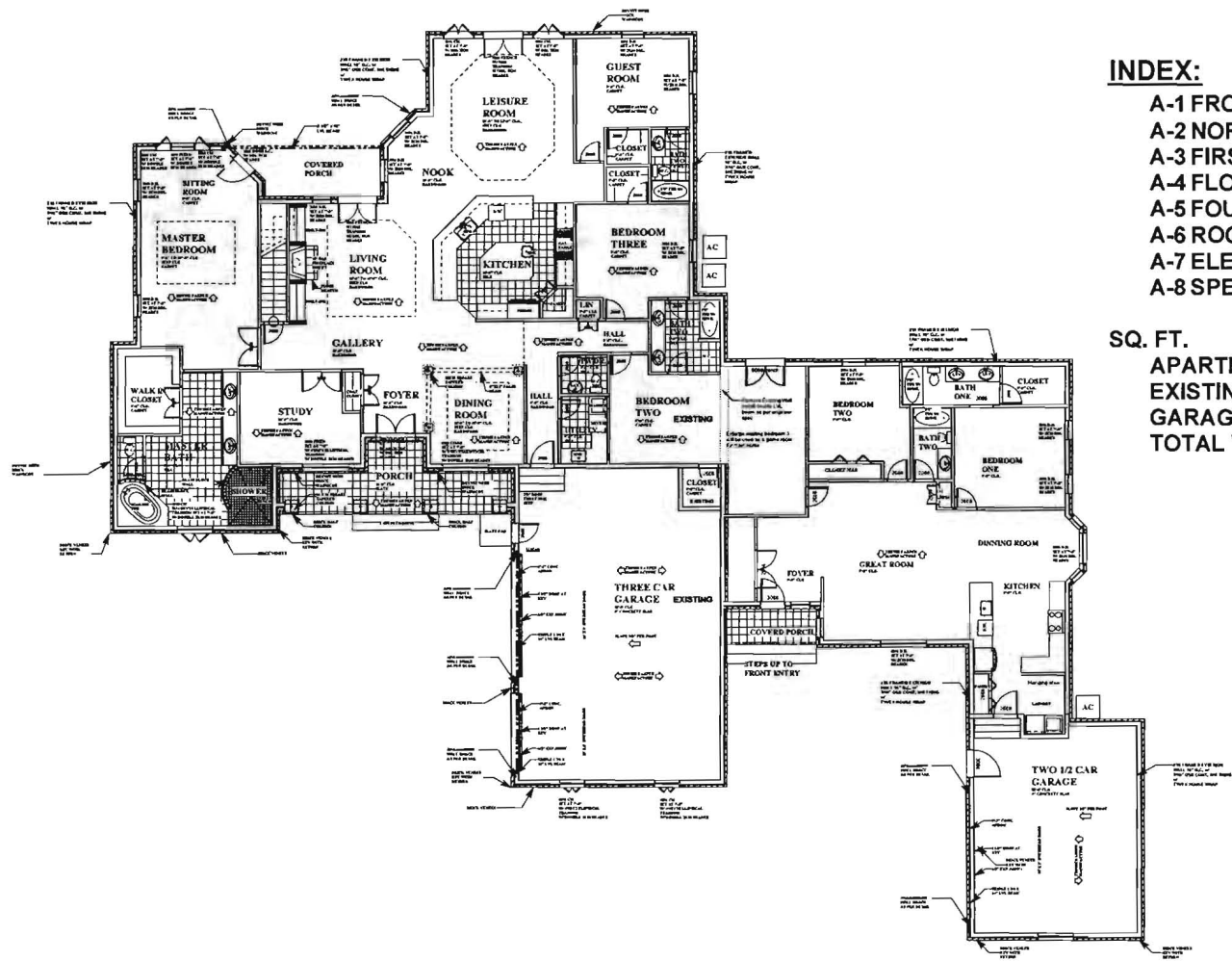
Phone (410) 313-2775

E-mail: [DBernard@howardcountymd.gov](mailto:DBernard@howardcountymd.gov)

cc: Well & Septic program file

# TO ADDITION

SHEET NO. C-1  
 DATE: 06/20/00  
 CAD FILE NAME:



## INDEX:

- A-1 FRONT/REAR ELEVATIONS
- A-2 NORTH/SOUTH ELEVATIONS
- A-3 FIRST FLOOR PLAN
- A-4 FLOOR FRAMING PLAN
- A-5 FOUNDATION/BASEMENT PLAN
- A-6 ROOF PLAN
- A-7 ELECTRICAL PLAN
- A-8 SPECIFICATIONS/SECTION PLAN

## SQ. FT.

- APARTMENT - 1498 SF
- EXISTING BEDROOM ENLARGE - 60 SF
- GARAGE - 619 SF
- TOTAL WHOLE ADDITION - 2177 SF

**MIND-FULL INNOVATIONS**

**TO ADDITION**  
 111 PARK DRIVE, CT  
 WOODBRIDGE, MD

SHEET NO.

C-1

DATE

06/20/00

DRAWING FILE

COVER

DESIGNED BY

James P. Johnson

SCALE

DATE: 06/20/00

CAD FILE NAME

## 1.0 GENERAL

1.0 CONSTRUCTION SHALL COMPLY WITH THE INTERNATIONAL RESIDENTIAL CODE 2012 AND ALL APPLICABLE LOCAL AND STATE CODES, ORDINANCES, REGULATIONS AND AMENDMENTS AND ALL OTHER AUTHORITIES HAVING JURISDICTION. CONSTRUCTION SHALL COMPLY WITH INTERPRETATIONS OF THE LOCAL BUILDING OFFICIAL. IF THE INTERPRETATION OF THE LOCAL BUILDING OFFICIAL IS AT VARIANCE WITH THESE PLANS OR SPECIFICATIONS, THE MORE STRINGENT SHALL APPLY.

1.02 IN THE EVENT OF A DISCREPANCY BETWEEN THE ARCHITECTURAL PLANS OR SPECIFICATIONS AND THE STRUCTURAL DRAWINGS, THE STRUCTURAL DRAWINGS SHALL TAKE PRECEDENCE.

### 1.03 DESIGN LOADS:

TYPE LOAD (PSF)	LIVE LOAD (PSF)	DEAD
ROOF	30	20
SLEEPING ROOMS	30	15
OTHER LIVING AREAS	40	15
GARAGE FLOORS	50	50
DECKS	40	10
EXTERIOR BALCONIES	60	15

2.01 SITE WORK IS NOT ADDRESSED IN THESE DOCUMENTS.

## 3.0 CONCRETE/FOUNDATIONS

3.01 ALL REINFORCED CONCRETE WORK SHALL BE IN ACCORDANCE WITH THE AMERICAN CONCRETE INSTITUTE ACI 318, CURRENT EDITION. ALL PLAIN CONCRETE SHALL CONFORM TO ACI 318.1 AND ACI 332R GUIDE TO RESIDENTIAL CAST-IN-PLACE CONCRETE CONSTRUCTION.

3.02 MINIMUM SPECIFIED COMPRESSIVE STRENGTH @ 28 DAYS:

LOCATION OF CONCRETE	F <sub>C</sub> (PSI)
BASEMENT WALLS AND FOUNDATIONS NOT EXPOSED TO WEATHER	2500
BASEMENT SLABS AND INTERIOR SLABS ON GRADE	2500
BASEMENT WALLS, EXTERIOR FOUNDATION WALLS AND OTHER WORK EXPOSED TO WEATHER	3000
DRIVEWAYS, CURBS, WALKS, PATIOS, PORCHES, STEPS/STAIRS, AND UNHEATED GARAGE SLABS EXPOSED TO WEATHER	3500

3.02 THICKNESS AND REINFORCING OF CONCRETE FOUNDATIONS WALLS SHALL CONFORM TO THE INTERNATIONAL RESIDENTIAL CODE, CURRENT EDITION, TABLE R404.1.1 (1-4), OR WITH SEALED STRUCTURAL DRAWINGS SPECIFIC TO THE SITE SOIL AND GRADE CONDITIONS.

## 4.0 MASONRY

4.01 ALL MASONRY WORK SHALL CONFORM TO THE APPLICABLE REQUIREMENTS OF THE BIA AND NCMA "SPECIFICATION FOR CONCRETE MASONRY CONSTRUCTION."

4.02 BRICK VENEER WALLS SHALL HAVE NON-CORROSIVE METAL TIES AT MINIMUM 16" O.C. VERTICALLY AND HORIZONTALLY, AND WEEP HOLES AT 24" O.C. AT BASE FLASHING AND CAVITY INTERRUPTIONS.

## 5.0 METALS

5.01 FOUNDATION ANCHOR BOLTS SHALL BE PROVIDED AT MAXIMUM 6'-0" O.C. AND 12" FROM THE END OF EACH PLATE SECTION, WITH MINIMUM TWO (2) ANCHORS PER SECTION OF PLATE. ANCHOR STRAPS SPACED TO ACHIEVE EQUIVALENT CAPACITY MAY BE SUBSTITUTED FOR ANCHOR BOLTS.

5.02 ALL METAL ANCHORS, FASTENERS, HANGERS, ETC. SHALL BE GALVANIZED. ALL STRUCTURAL STEEL WIDE-FLANGE BEAMS SHALL CONFORM TO ASTM A-992 WITH MINIMUM STRENGTH F<sub>y</sub> = 50 KSI. ALL STRUCTURAL STEEL CHANNELS, ANGLES, RODS AND BAR STOCK SHALL CONFORM TO ASTM A-36 WITH MINIMUM STRENGTH F<sub>y</sub> = 36 KSI.

5.03 ADJUSTABLE STEEL COLUMNS SHALL BE MINIMUM 11 GAUGE, ASTM A513 OR BETTER, AND SHALL MEET OR EXCEED AISA PUBLISHED ALLOWABLE LOAD CAPACITY. COLUMNS SHALL HAVE A MINIMUM 8"X4"X1/4" BEARING PLATE. SCREW JACK SHALL BE ENCASED IN CONCRETE OR TACK WELDED AFTER INSTALLATION.

## 6.0 WOOD

6.01 SILL PLATES AND ALL WOOD IN CONTACT WITH MASONRY OR CONCRETE, AND ALL EXPOSED EXTERIOR LUMBER, SHALL BE PRESSURE TREATED TO MEET AWPJ STANDARDS.

6.02 MOISTURE CONTENT OF ALL LUMBER SHALL NOT EXCEED 19%.

6.03 WOOD BEAMS, JOISTS, HEADERS AND RAFTERS SHALL BE MINIMUM S-P-F #1#2 OR EQUAL UNLESS OTHERWISE NOTED.

6.04 LVL MEMBERS SHALL BE 1-3/4" WIDE, DEPTH PER PLANS, GANGED PER MANUFACTURER'S SPECIFICATIONS, WITH THE FOLLOWING MINIMUM PROPERTIES: F<sub>b</sub>=2,600 PSI; F<sub>c</sub>= 750 PSI; F<sub>v</sub>=285 PSI; E=1,900,000 PSI.

6.05 PSL MEMBERS SHALL BE SIZED PER PLANS, WITH THE FOLLOWING MINIMUM PROPERTIES: F<sub>b</sub>=2,900 PSI; F<sub>c</sub>=750 PSI; F<sub>v</sub>= 290 PSI; E=2,000,000 PSI.

6.06 PREFABRICATED FLOOR JOISTS OR FLOOR TRUSSES SHALL BE DESIGNED TO CARRY ALL IMPOSED LIVE AND DEAD LOADS WITH THE LIVE LOAD DEFLECTION NOT TO EXCEED L/480. THE MANUFACTURER SHALL PROVIDE ALL REQUIRED HANGERS, SHEAR PANELS, BLOCKING/BRACING AND OTHER REQUIRED COMPONENTS. THE MANUFACTURER SHALL ALSO PROVIDE ALL DRAWINGS REQUIRED FOR PERMIT AND ERECTION PURPOSES, SIGNED AND SEALED IF REQUIRED BY A PROFESSIONAL ENGINEER REGISTERED IN THE STATE WHERE THE JOB IS TO BE BUILT.

6.07 PRE-ENGINEERED TRUSSES SHALL BE DESIGNED AND FABRICATED IN ACCORDANCE WITH TPI RECOMMENDATIONS TO CARRY ALL IMPOSED LIVE AND DEAD LOADS. THE MANUFACTURER SHALL ALSO PROVIDE ALL DRAWINGS REQUIRED FOR PERMIT AND ERECTION PURPOSES, SIGNED AND SEALED IF REQUIRED BY A PROFESSIONAL ENGINEER REGISTERED IN THE STATE WHERE THE JOB IS TO BE BUILT.

6.08 JOISTS SHALL BE DOUBLED UNDER PARALLEL WALLS THAT EXCEED ONE-THIRD THE JOIST LENGTH. JOISTS SHALL BE SPACED CLOSER UNDER BATH TUBS, CERAMIC OR MARBLE TILE, POTENTIAL WATER BEDS AND SIMILAR ANTICIPATED LOADING CONDITIONS. JOISTS SHALL NOT BE CUT, NOTCHED OR DRILLED EXCEPT AS PERMITTED BY IRC 2003 R502.8 OR OTHER APPLICABLE CODE.

6.09 HEADERS OVER FRAMED OPENINGS IN BEARING WALLS SHALL BE MINIMUM 2-2X10 UNLESS OTHERWISE NOTED ON DRAWINGS, BUT SHALL IN NO EVENT BE LESS THAN SPECIFIED IN IRC 2003 TABLE R502.5 OR OTHER APPLICABLE CODE.

## 7.0 THERMAL AND MOISTURE PROTECTION

7.01 1/2" X 3-1/2" MIN COMPRESSIBLE SILL SEAL SHALL BE PROVIDED BENEATH ALL EXTERIOR SILL PLATES.

7.02 INSULATION SHALL BE PROVIDED AS FOLLOWS:  
2X4 WALLS: R-21 MINIMUM WITH INTEGRAL VAPOR BARRIER

2X6 WALLS: R-21 MINIMUM WITH INTEGRAL VAPOR BARRIER  
CEILINGS AT ROOF: R-49 MINIMUM, BLOWN OR BATT FLOOR OVER UNHEATED AREA: R-30 BATT  
BASEMENT WALLS: R-11 MINIMUM FOIL-FACED  
BASEMENT SLAB: R-10 MINIMUM RIGID EXTERIOR

GRADE, EXTENDING 24" HORIZONTALLY AND/OR VERTICALLY

PER LOCAL JURISDICTION.  
7.02 WINDOW U-VALUES NOT TO EXCEED 0.45

## GENERAL CONSTRUCTION NOTES

1. THE CONTRACTOR SHALL SECURE ALL NECESSARY PERMITS. CONSTRUCTION SHALL BE IN FULL ACCORDANCE WITH ALL LOCAL CODES AND REGULATION IN EFFECT AT THE TIME OF PERMIT ISSUANCE.

2. THE CONTRACTOR SHALL BE RESPONSIBLE FOR INITIATING, MAINTAINING AND SUPERVISING ALL SAFETY PROGRAMS AND PRECAUTIONS IN CONNECTION WITH THE WORK. THE CONTRACTOR SHALL TAKE ALL REASONABLE PRECAUTIONS AND PROVIDE ALL REASONABLE PROTECTION TO PREVENT DAMAGE, INJURY OR LOSS TO: ALL EMPLOYEES ON THE WORK AND ALL OTHER PERSONS WHO MAY BE AFFECTED THEREBY, INCLUDING THE HOMEOWNER, HIS FAMILY, AND OTHERS WHO MAY BE ON THE PREMISES FROM TIME TO TIME: ALL THE WORK AND ALL MATERIALS AND EQUIPMENT TO BE INCORPORATED THEREIN: AND OTHER PROPERTY AT THE SITE OR ADJACENT THERETO, INCLUDING THE EXISTING RESIDENCE, DRIVEWAYS, LEAD WALKS, OR OTHER STRUCTURES.

3. ANY DAMAGE OR LOSS TO ANY PROPERTY REFERENCED IN ITEM #2 CAUSED IN WHOLE OR PART BY THE CONTRACTOR, ANY OF HIS SUBCONTRACTORS, OR BY ANYONE DIRECTLY OR INDIRECTLY EMPLOYED BY ANY OF THEM SHALL BE REMEDIATED BY THE CONTRACTOR.

4. IF, WITHIN ONE YEAR AFTER THE WORK HAS BEEN ACCEPTED BY THE OWNER, ANY OF THE WORK IS FOUND TO BE DEFECTIVE OR NOT IN CONFORMANCE WITH THE CONTRACT DOCUMENTS, THE CONTRACTOR SHALL CORRECT IT PROMPTLY UPON RECEIPT OF WRITTEN NOTICE BY THE OWNER TO DO SO, AND SHALL BEAR ALL COSTS FOR SUCH CORRECTION, UNLESS THE OWNER HAS PREVIOUSLY PROVIDED THE CONTRACTOR WRITTEN NOTICE OF ACCEPTANCE OF SUCH CONDITION.

5. ALL PROJECT DEBRIS SHALL BE DISPOSED OF OFF THE SITE BY THE CONTRACTOR.

6. THE CONTRACTOR SHALL PROPERLY EXTEND, TERMINATE OR OTHERWISE MODIFY EXISTING UTILITIES, INCLUDING, BUT NOT LIMITED TO, MEDICAL, ELECTRICAL AND PLUMBING INSTALLATIONS, AS MAY BE REQUIRED. BOX IN EXPOSED STANDPIPES.

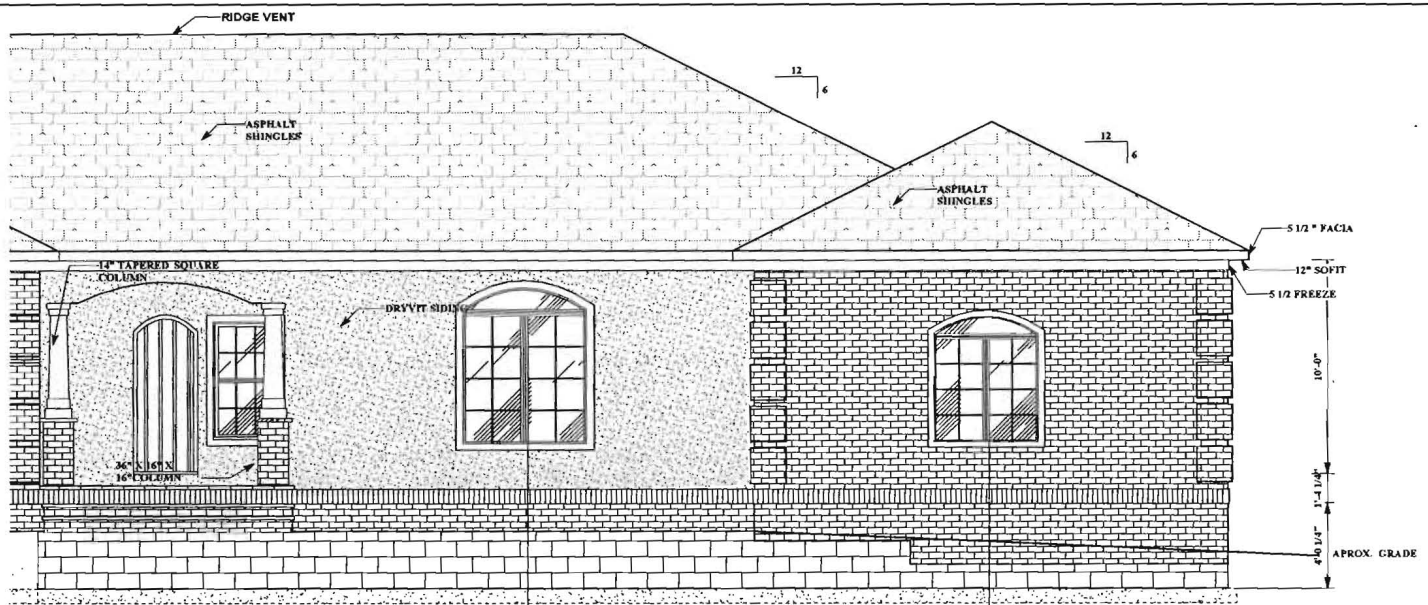
7. COLORS, MATERIALS AND FINISH DETAILS OF NEW CONSTRUCTION SHALL MATCH EXISTING AS CLOSELY AS POSSIBLE, UNLESS OTHERWISE SPECIFIED. FEATHER OR TOOTH IN NEW FINISHED TO EXISTING, WHERE APPLICABLE, TO MINIMIZE APPEARANCE OF JOINTS.

8. ON-SITE VERIFICATION OF ALL DIMENSIONS AND CONDITIONS SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR AND HIS SUBCONTRACTORS. CONTRACTOR SHALL VERIFY ADEQUACY OF EXISTING STRUCTURE TO RECEIVE NEW CONSTRUCTION.

9. PROVIDE ACCESS PANELS AS REQUIRED AT ALL VALVES, CLEANOUTS, UTILITY PANELS, CABLE HOME RUNS, AND ALL OTHER LOCATIONS THAT READY ACCESS MAY BE REQUIRED.



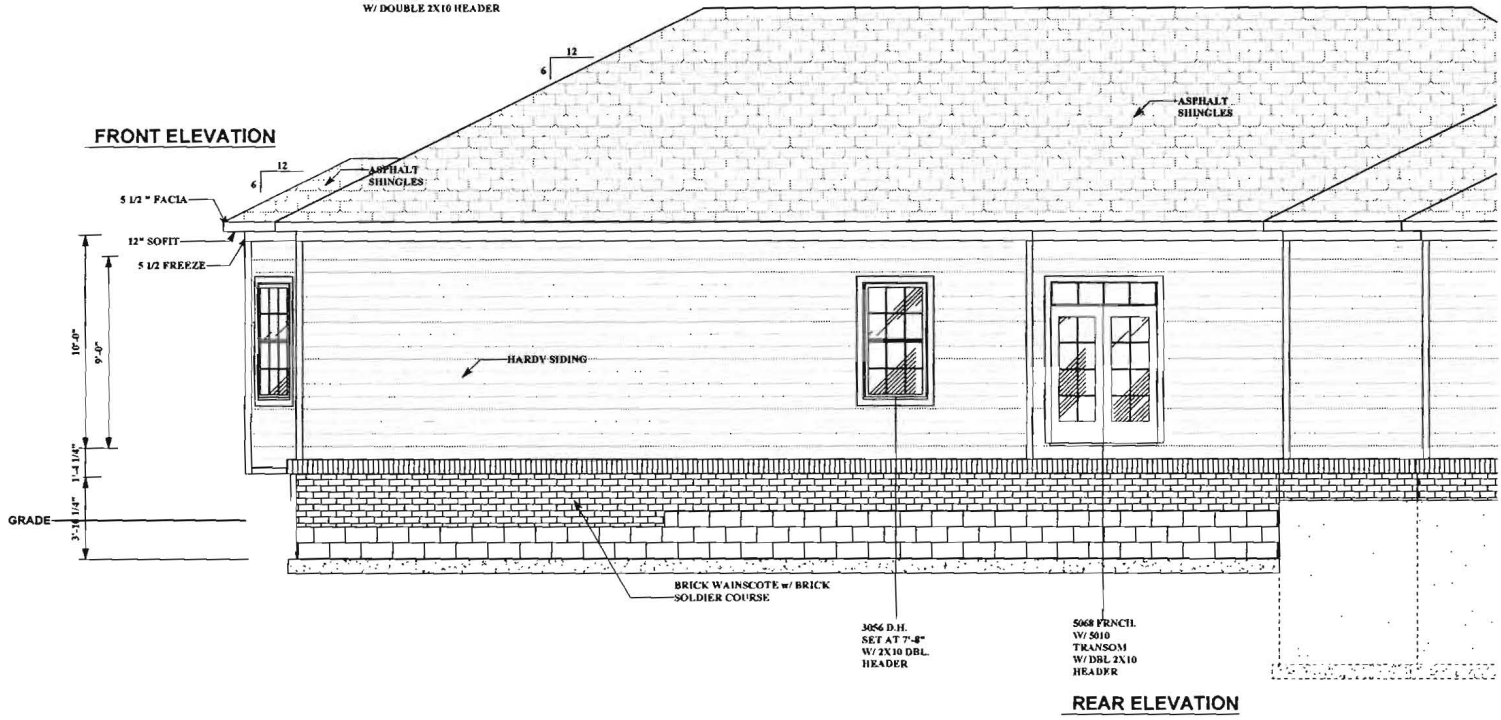
FOR ASHLEY ST.  
1311 DOW CENTER CT.  
WOODSTOCK, MD



6060 FIXED  
SET AT 7'-8"  
W/ 6"X14" ELLIPTICAL  
TRANSOM  
W/ DOUBLE 2X10 HEADER

48-46 CM  
W/ 4"X12" ELLIPTICAL  
TRANSOM SET AT 7'-8"  
W/ DOUBLE 2X10 HEADER

**FRONT ELEVATION**



BRICK WAINSCOTE W/ BRICK  
SOLDIER COURSE

3056 D.H.  
SET AT 7'-4"  
W/ 2X10 DBL.  
HEADER

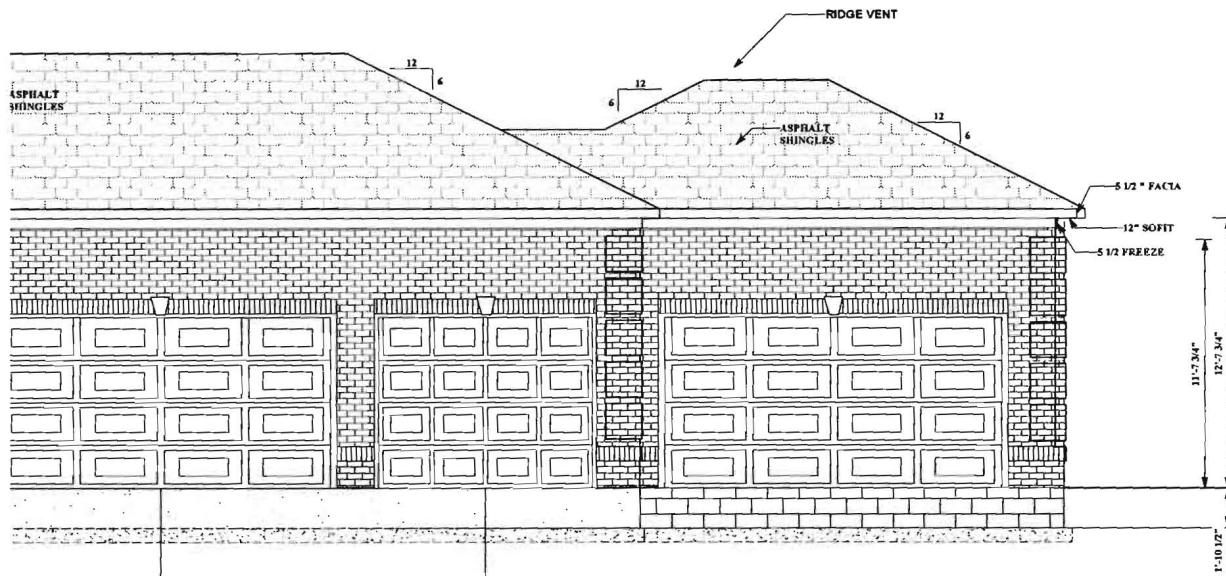
5068 FRNCIL  
W/ 5010  
TRANSOM  
W/ DBL 2X10  
HEADER

**REAR ELEVATION**

**MIND-FULL INNOVATIONS**

TO ADDITION  
1311 DOW CENTER CT.  
WOODSTOCK, MD

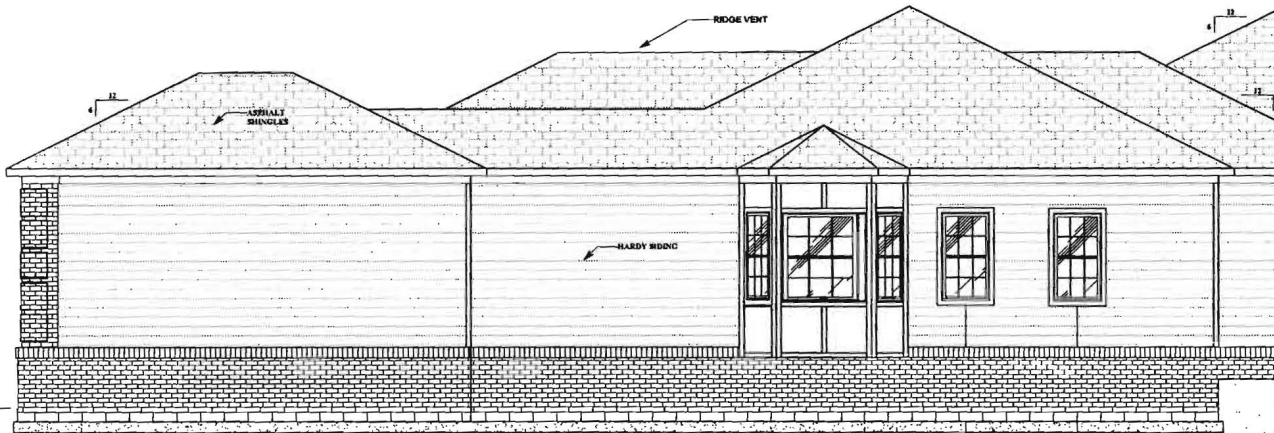
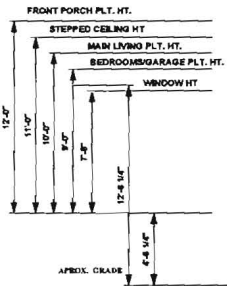
SHEET NO.	A-1
DATE	10-1-11
PROJECT	FRONT/ REAR ELEVATION
DESIGNER	ASHLEY ST.
CAD FILE NAME	



16' x 8' OVERHEAD DOOR

16' x 8' OVERHEAD DOOR

**NORTH ELEVATION**



**SOUTH ELEVATION**

3064 D.J.L.  
SKY AT 7'-0"  
W/ 2X10 D.B.L.  
HEADER

3064 D.J.L.  
SKY AT 7'-0"  
W/ 2X10 D.B.L.  
HEADER

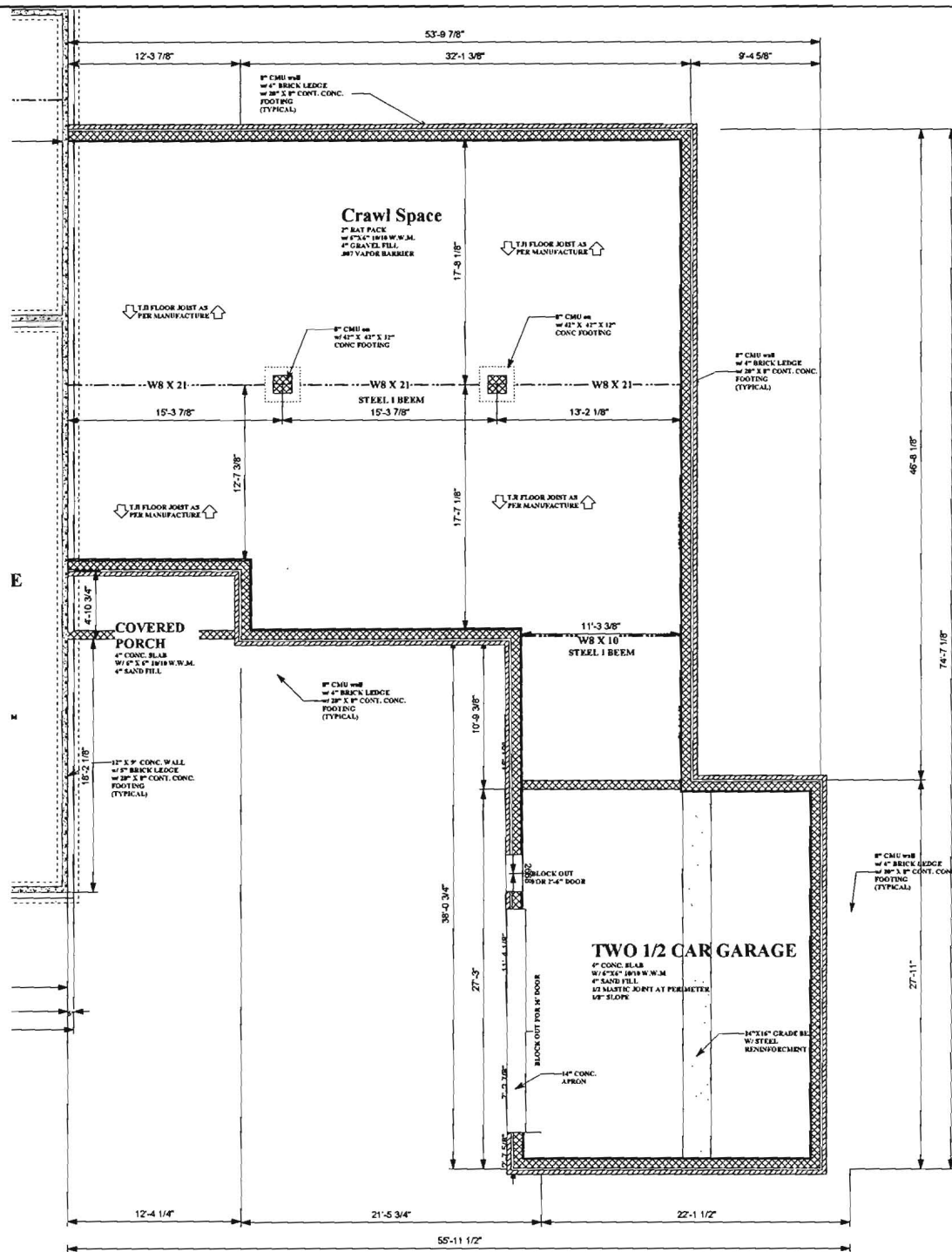
UNIVERSITY OF MISSISSIPPI  
ARCHITECTURAL CENTER  
300 N. GARDNER ST.  
MISSISSIPPI STATE, MS 39762

**MIND-FULL INNOVATIONS**

**TO ADDITION**  
111 WOODBURN RD.  
WOODBRIDGE, MS

SHEET NO. A-4  
Drawing Title: NORTH/SOUTH ELEVATION  
Drawn By: [Blank]  
Checked By: [Blank]  
Scale: 3/16" = 1'  
Date: 05/18/13  
CAD File Name: [Blank]



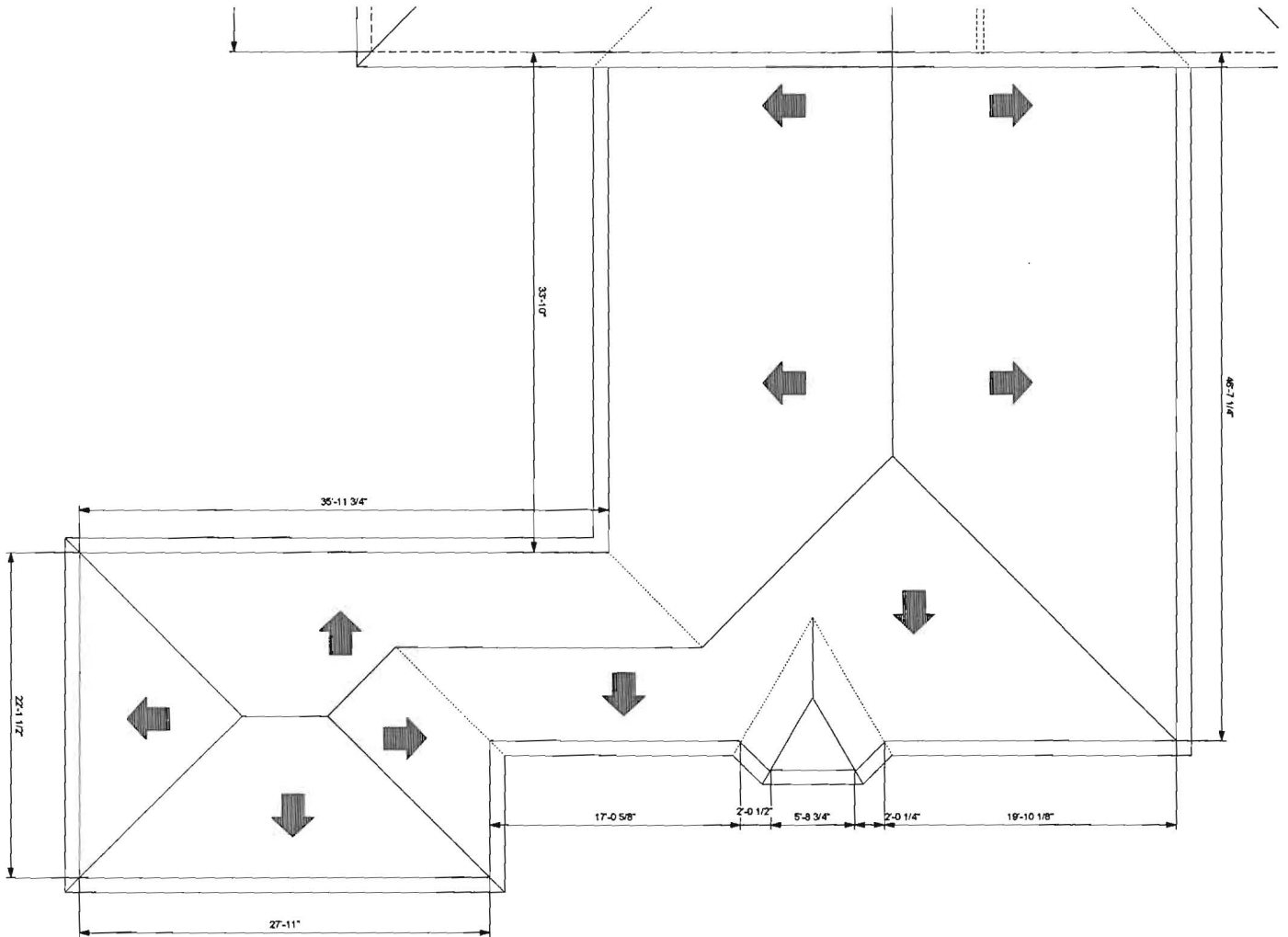


PREPARED BY:  
 DATE:  
 PROJECT NO.:

# MIND-FULL INNOVATIONS

TO ADDITION  
 1811 Lakeview Ct  
 Woodbury, MD

SHEET NO.	1
OF	1
Prepared by:	Basement / Foundation / Plan / Roof Plan
Drawn by:	James Pugh
Scale:	1/4" = 1'
Date:	05/09/23
CAD File Name:	

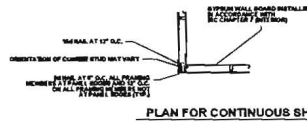
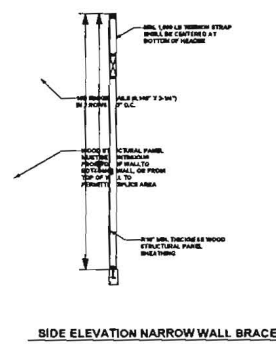
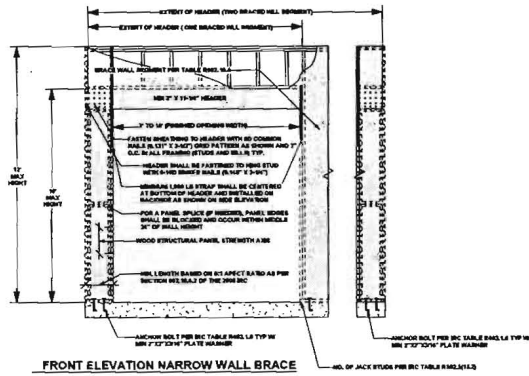


NO. OF SHEETS	1
SHEET NO.	1
DATE	
BY	
CHECKED BY	
APPROVED BY	
SCALE	
PROJECT NO.	
PROJECT NAME	
CLIENT	
ADDRESS	
CITY	
STATE	
COUNTRY	

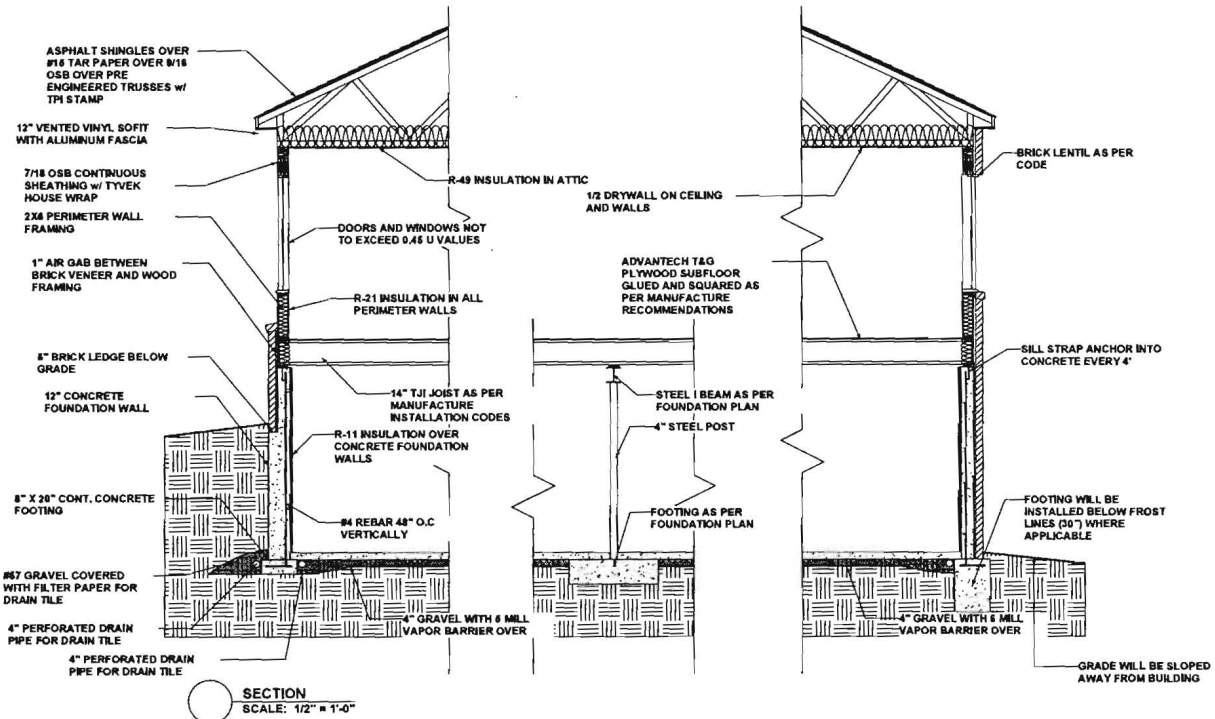
**TO ADDITION**  
 1811 Dole valley ct  
 Woodbine MD

**MIND-FULL INNOVATIONS**

FIRE LACE BELLE CT  
 HANNOVERTHALL MD 21146  
 TEL: 410-326-8888



STRUCTURAL BRACED WALL PANEL DETAIL  
SCALE: 1/2" = 1'-0"



UNLESS OTHERWISE NOTED ALL DIMENSIONS ARE IN FEET AND INCHES

MIND-FULL INNOVATIONS

TO ADDITION  
WOODWORK AND

Sheet No: 1 of 1  
Drawing Title: SECTION  
Drawn By: James P. Johnson  
Scale: 1/2" = 1'-0"  
Date: 01/18/17  
CAD File Name:

Name: James Pacylowski Mindfull Innovations LLC  
Street Address: 7255 Lake Hills Ct  
City, State, Zip: Mariottville Md 21104  
Date: 3-20-2013

RECEIVED

MAR 20 2013

LICENSES & PERMITS  
DIVISION

Amendment, Permit # B13000695

Ms. Debbie Whalen  
Division of Plan Review  
Department of Inspections, Licenses and Permits  
Howard County Government  
3430 Court House Dr  
Ellicott City, MD 21043

Dear Ms. Whalen:

I am requesting to amend Permit # B13000695 at  
1811 Boka Valley Ct Woodbine Md to  
Remove Deck area and enclose to make existing Bedroom 2  
larger this will satisfy the requirements of zoning

Enclosed:

cc: DED  
DPZ  
HEALTH

Fee: \_\_\_\_\_  
 Plot Plans 5  
 Sets of Construction Drawings 2  
Other: \_\_\_\_\_

If there is anything we can do to assist you, please let me know.

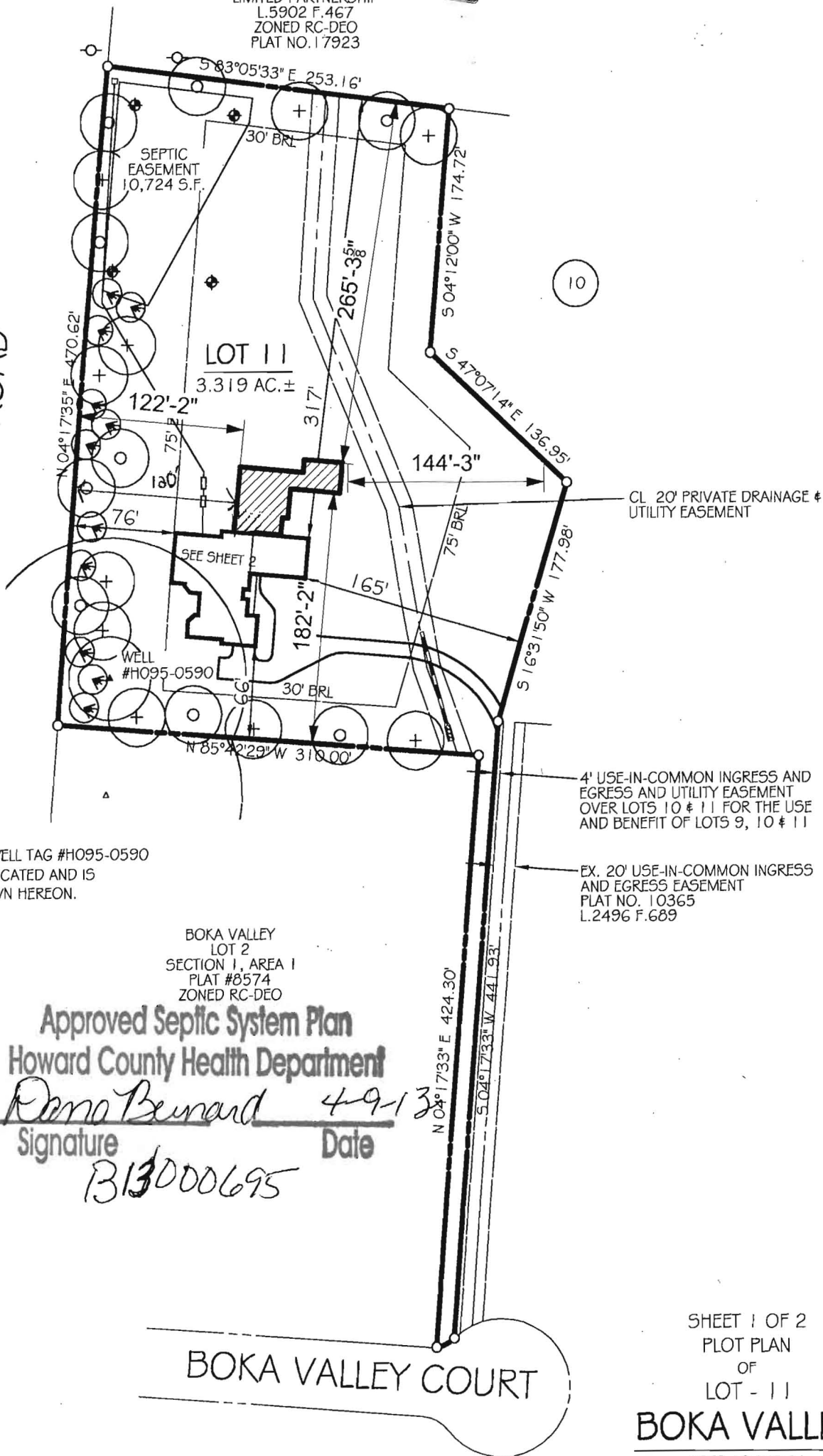
Sincerely,



Name: James Pacylowski  
Title: President / owner Mindfull Innovations LLC  
Phone: 443-824-6967  
Email: JPacylowski@me.com

TALLEY FAMILY  
LIMITED PARTNERSHIP  
L.5902 F.467  
ZONED RC-DEO  
PLAT NO.17923

DAISY ROAD



NOTE: EXISTING WELL TAG #H095-0590  
HAS BEEN FIELD LOCATED AND IS  
ACCURATELY SHOWN HEREON.

BOKA VALLEY  
LOT 2  
SECTION 1, AREA 1  
PLAT #8574  
ZONED RC-DEO

Approved Septic System Plan  
Howard County Health Department

*Reno Bernard* 4-9-13  
Signature Date

*B13000695*

BOKA VALLEY COURT

SHEET 1 OF 2  
PLOT PLAN  
OF  
LOT - 11

**BOKA VALLEY**

LOTS 10 AND 11  
A RESUBDIVISION OF LOT 8  
BOKA VALLEY, PLAT #10365  
TAX MAP 08, GRID 19, PARCEL 43  
4TH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
PLAT# 18813

REVISED

Date: 03/20/13

Comments: *B13000695*



RTF ASSOCIATES, INC.  
PROFESSIONAL LAND SURVEYORS & PLANNERS  
410-848-2040 FAX-410-840-8387 410-876-1222  
142 EAST MAIN STREET

REVISED: 06-07-2010 PER HEALTH DEPT AND COUNTY COMMENTS

SCALE	DRAWN BY	DATE	CHECKED BY	DATE	JOB
1"=100'	GP	04-07-10	GP	04-07-10	10-25