



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: 4/13/16

Permit No.: B16001571

Building Address: Sweetbay Street, LT 42
 City: 15225 Woodbine State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 42
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD
 Proposed Use: SFD - with tank
 Estimated Construction Cost: \$ 600.00
 Description of Work: Install 1x1000 U.G. and run gas line 15 feet to slab of house propane
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Shannonian Communities
 Address: 15353 Union Chapel Road
 City: Woodbine State: MD Zip Code: 21797
 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: Economy Propane
 Contact Person: Booby Perry
 Address: P.O. Box 1772
 City: Millersville State: MD Zip Code: 21108
 License No.: 93150
 Phone: 410-923-1132 Fax: 410-923-1134
 Email: Economypropane@verizon.net

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:	
➤ Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities
Water Supply
<input checked="" type="checkbox"/> Public
<input 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: Booby Perry
 Email Address: booby@economypropane.com Date: 4/13/16
 Title/Company: Economy Propane

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>4/22/16</u>	<u>H. Oswald</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	\$ 100.00
Tech Fee	\$ 10.00
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ 110.00
Sub-Total Paid	\$
Balance Due	\$
Check #	<u>6664</u>



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: 6/26/15

Permit No.: B15002820

Building Address: 15225 Sweetbay St.
City: WOODBINE State: MD Zip Code: 21797
Suite/Apt. #: _____ SDP/WP/BA #: F-07-38
Census Tract: _____ Subdivision: BELLE HAVEN
Section: _____ Area: _____ Lot: 42
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: vacant lot
Proposed Use: new S. F. D.

Estimated Construction Cost: \$ 375,000

Description of Work: COLORADO w/ MORN. RM, 6' FAM RM AND LIBRARY EXTS. E, CONSERVATORY, 2 STORY, Full BSMT, 14 R, SFB, 1HB, 2FP, E

Occupant or Tenant: 20M GMAbe (4BR) Fin L/L-Rec RM.

Was tenant space previously occupied? Yes No + BATHRM

Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: BELLE HAVEN BAKER LLC
Address: 10751 Falls Rd. Ste. 405
City: LUTHERVILLE State: MD Zip Code: 21093
Phone: _____ Fax: _____
Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Vicky Meyer
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: 410-296-6900 Fax: _____
Email: MDBLDGPERMITS@COMCAST.NET

Contractor Company: K. HOVNANI, AN HOMES
Contact Person: Chester Willett
Address: 1802 Brightseat Rd.
City: Landover State: MD Zip Code: 20785
License No.: 3149
Phone: 301-772-8900 Fax: _____
Email: CWillett@KHOV.COM

Engineer/Architect Company: D. D. C.
Responsible Design Prof.: Brian Collins
Address: 192 E. Main St.
City: Westminster State: MD Zip Code: 21157
Phone: 410-386-0560 Fax: _____
Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" 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 checked="" 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:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit #	<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 checked="" 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>613000401</u>
Grading Permit Number:	<u>613000401</u>
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: V. Meyer

Print Name: Vicky Meyer

Email Address: MDBLDGPERMITS@COMCAST.NET

Date: 6/26/2015

AGENT
Title/Company

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

FOR OFFICE USE ONLY

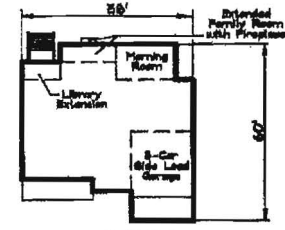
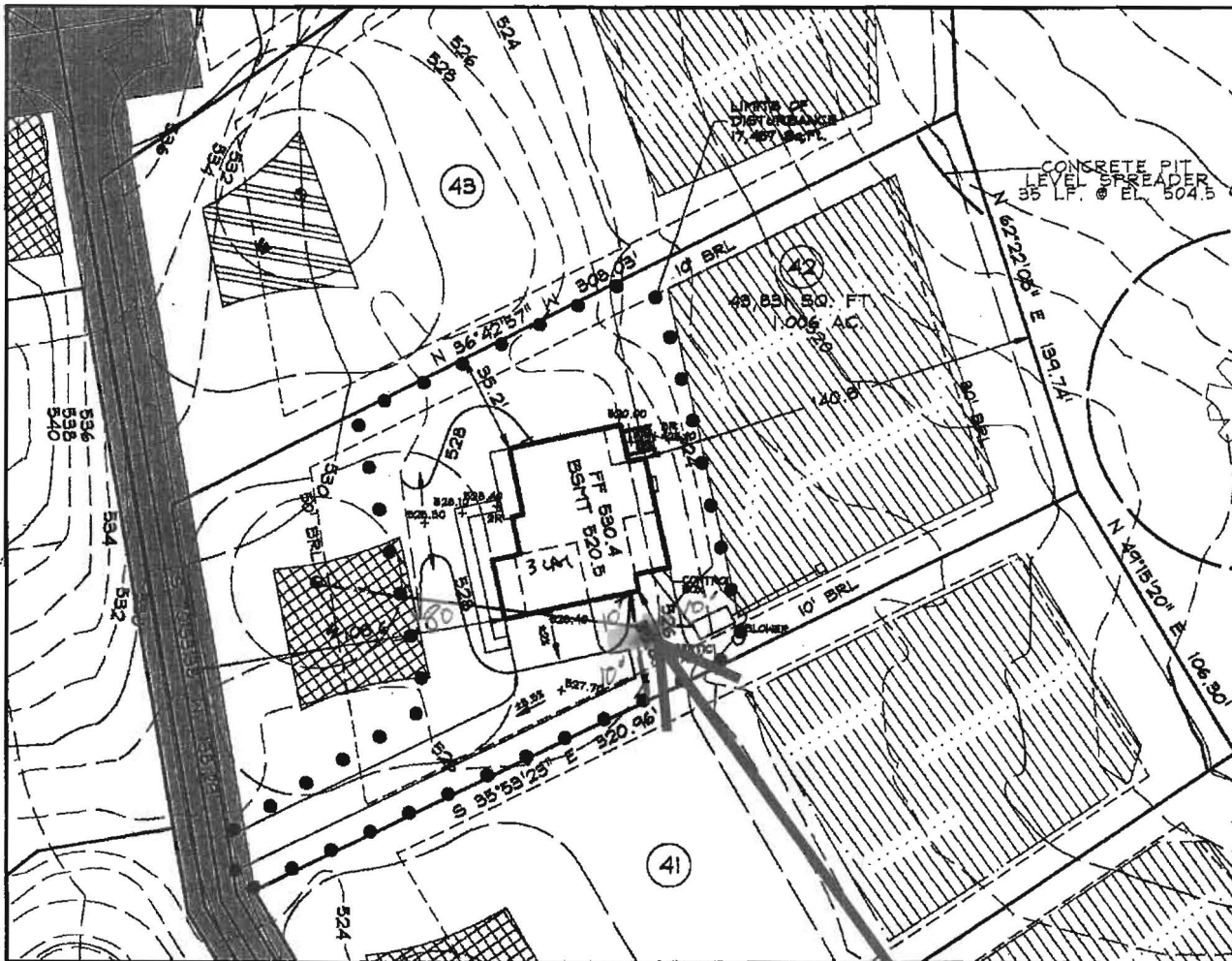
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>6/26/15</u>	<u>H. Oswald</u>

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>150</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>22808</u>

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

B 1500 2820 - REVISION chg. Elev. ϵ , to three CA1



COLORADO COUNTRY ELEVATION BRICK FRONT

GENERAL NOTES

1. THE EXISTING WELL SHOWN ON THIS PLAN (HO-95-0650) HAS BEEN LOCATED BY DDC, PROFESSIONAL LAND SURVEYOR, AND IS ACCURATELY SHOWN.
2. BASE SQUARE FOOTAGE OF HOUSE IS 592 sq.ft.
NUMBER OF BEDROOMS: 4
3. INFORMATION SHOWN ON THIS PLAN BASED ON PLANS PREPARED BY DMW DATED 6/26/07. EXISTING TOPOGRAPHY BASED ON GRADING PLAN PREPARED BY DEMARIO DESIGN CONSULTANTS DATED 7/9/07 AND FIELD RUN TOPOGRAPHY PREPARED BY DDC INC IN JAN. 2012
4. A DRIVEWAY CULVERT IS NOT REQUIRED PER THE APPROVED ROAD DRAWINGS F-07-55.
5. EJECTOR PUMP REQUIRED TO SEWER BASEMENT.
6. AT ANY TIME IN THE FUTURE THAT A BUILDING PERMIT IS SUBMITTED TO FINISH THE AREA CURRENTLY IDENTIFIED AS OPTIONAL DEN, THEN A SEPTIC SYSTEM UPGRADE WILL BE REQUIRED AS FINISHING THE OPTIONAL DEN CREATES A FIFTH BEDROOM PER HOWARD COUNTY CODE S.801(B).



Development Design Consultants

Planners
Surveyors
Engineers
Landscape Architects

192 East Falls Street
Westminster, MD 21157
410.386.0540
410.386.0564 (fax)
DDC@DDCinc.com
www.DDCinc.com

DDC JOB#:	06116.5
DATE:	11/16/16
SCALE:	1" = 50'
DES. BY:	BKC
DRN. BY:	BKC
CHK. BY:	BKC

BELLE HAVEN ESTATES
3rd ELECTION DISTRICT HOWARD COUNTY, MD
TAX MAP 14, PARCEL 66

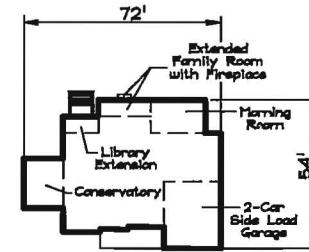
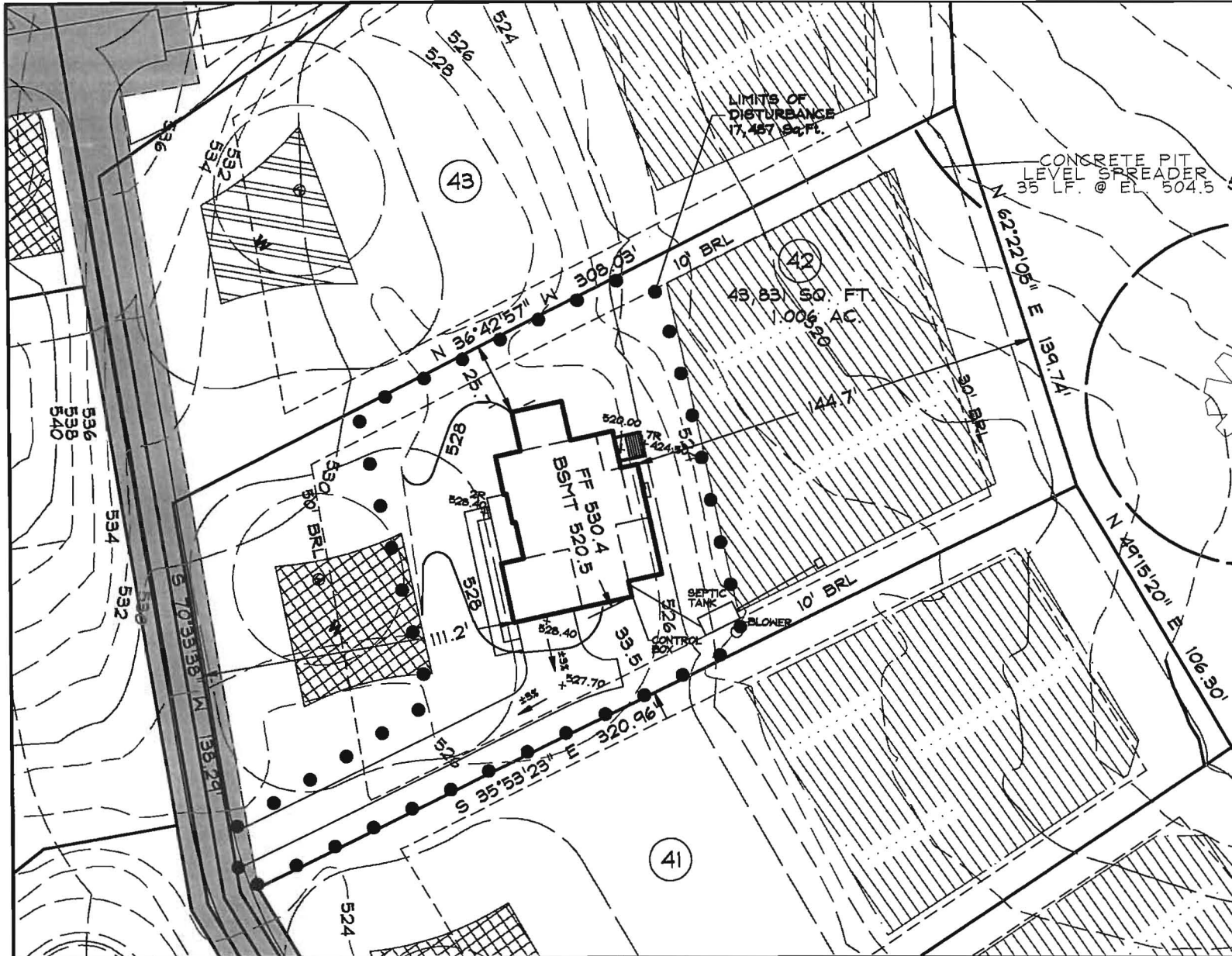
LOT 42
15225 SWEETAY STREET
WOODBINE, MD 21797
PLOT PLAN
KHOV ELEVATION

OWNER/BUILDER: K.HOVNANIAN HOMES
1802 Brightseat Road
Landover, Maryland 20785
(301)685-6268

4/22/16 Site plan approved
as shown for B16001571
(propane tank) - H.O.

Propane Tank

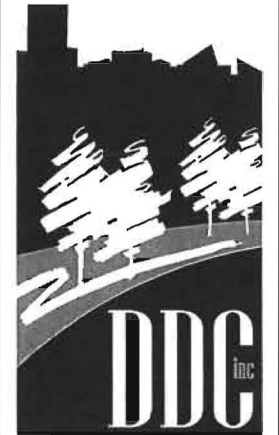
171116- Site plan approved as shown for B15002820. H.O.



COLORADO ELEVATION 'A' BRICK/STONE FRONT

GENERAL NOTES

1. THE EXISTING WELL SHOWN ON THIS PLAN (HO-95-0650) HAS BEEN LOCATED BY DDC, PROFESSIONAL LAND SURVEYOR, AND IS ACCURATELY SHOWN.
2. BASE SQUARE FOOTAGE OF HOUSE: 3,562 sq. ft.
NUMBER OF BEDROOMS: 4
3. INFORMATION SHOWN ON THIS PLAN BASED ON PLANS PREPARED BY DMW DATED 6/25/07. EXISTING TOPOGRAPHY BASED ON GRADING PLAN PREPARED BY DEMARIO DESIGN CONSULTANTS DATED 7/9/07 AND FIELD RUN TOPOGRAPHY PREPARED BY DDC INC IN JAN. 2012
4. A DRIVEWAY CULVERT IS NOT REQUIRED PER THE APPROVED ROAD DRAWINGS F-07-38.
5. EJECTOR PUMP REQUIRED TO SEWER BASEMENT.
6. AT ANY TIME IN THE FUTURE THAT A BUILDING PERMIT IS SUBMITTED TO FINISH THE AREA CURRENTLY IDENTIFIED AS OPTIONAL DEN, THEN A SEPTIC SYSTEM UPGRADE WILL BE REQUIRED AS FINISHING THE OPTIONAL DEN CREATES A FIFTH BEDROOM PER HOWARD COUNTY CODE 3.801(B).



Development Design Consultants

Planners
Surveyors
Engineers
Landscape Architects

192 East Main Street
Westminster, MD 21157
410.386.0560
410.386.0564 (Fax)
DDC@DDCinc.us
www.DDCinc.us

DDC JOB#: 06116.5

DATE: 6/12/15

SCALE: 1" = 50'

DES. BY: BKC

DRN. BY: BKC

CHK. BY: BKC

BELLE HAVEN ESTATES
3rd ELECTION DISTRICT HOWARD COUNTY, MD
TAX MAP 14, PARCEL 66

LOT 42
15225 SWEETBAY STREET
WOODBINE, MD 21797
PLOT PLAN
KHOV ELEVATION

OWNER/BUILDER: K.HOVNANIAN HOMES
1802 Brightseat Road
Landover, Maryland 20785
(301)683-6268



Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

July 14, 2015

CHESTER WILLET
K. HOVNANIAN HOMES OF MARYLAND, LLC
1802 BRIGHTSEAT ROAD
LANDOVER, md 20785

Sent via email to: CWILLETT@KHOV.COM

RE: Building Permit # B15002820
15225 Sweetbay Street
Woodbine, MD 21797

Dear Mr. Willet:

This letter is in response to building permit # B15002820. The application describes the construction of a single family dwelling. Upon review of the application, the submittal did not include a copy of the floor plans. Additionally, a BAT plan is required for this review.

At this time, the building permit application has been placed on hold until floor plans and a BAT Plan are submitted for review. Should any questions or concerns, please contact me directly at (410) 313 – 1786 or hoswald@howardcountymd.gov.

Sincerely,

Hank Oswald

Hank Oswald, L.E.H.S.
Howard County Health Department
Well & Septic Program

Oswald, Hank

From: Oswald, Hank
Sent: Tuesday, July 14, 2015 12:53 PM
To: 'CWILLETT@KHOV.COM'
Subject: B15002820_15225 Sweetbay Street
Attachments: BP Response Letter_SFD Floor Plans_2015.pdf

Hi Chester:

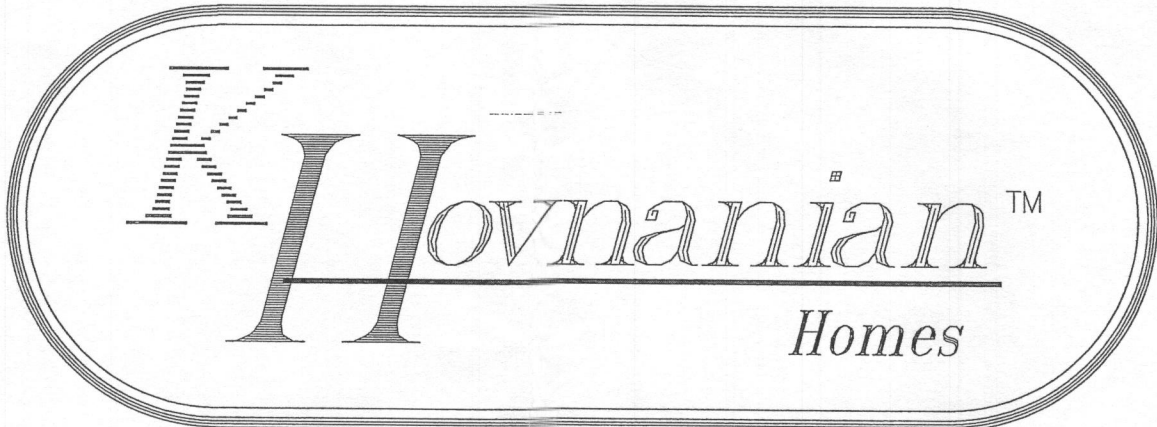
Please see attached letter regarding building permit # B15002820.

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
410.313.1786

SQUARE FOOTAGE CHART	
NAME	AREA
FIRST FLOOR PLAN (TRADITIONAL ELEV.)	1748
SECOND FLOOR PLAN (TRADITIONAL ELEV.)	1708
BASE SQUARE FOOTAGE	3456
COLONIAL ELEVATION	+ 109
COUNTRY ELEVATION	+ 109
GEORGIAN ELEVATION	+ 131
VICTORIAN ELEVATION	+ 162
ELEVATION A	+ 215
ELEVATION B	+ 215
OPT. LIVING RM. / DINING RM BAY WINDOW	+ 16
OPT. SIDE LIBRARY BAY WINDOW	+ 18
ALT. OWNERS SUITE W/ 3-CAR SIDE LOAD GARAGE	+ 5
BEDROOM 5 OVER STD FAMILY ROOM	+ 287
BEDROOM 5 OVER EXT. FAMILY ROOM	+ 395
OPT. SIDE CONSERVATORY	+ 252
OPT. FIRST FLOOR SUITE W/ BATH	+ 331
OPT. FIRST FLOOR SUITE 2 W/ BATH	+ 378
OPT. ALT. FIRST FLOOR SUITE W/ BATH	+ 471
OPT. 6' LIBRARY EXT.	+ 79
OPT. 6' FAMILY ROOM EXT.	+ 120
OPT. 12' MORNING ROOM / DES. KIT. / GRAND MR.	+ 244
OPT. REAR SUNROOM	+ 161
OPT. COMBO 12' MORNING ROOM & 6' F.R. EXT.	(361)
OPT. COMBO 12' MORNING ROOM & 6' F.R. & 6' LIB. EXT.	(440)
OPT. COMBO 12' MORNING ROOM & 6' F.R. & SUNROOM	(519)
OPT. FINISHED BASEMENT (TOTAL BASE HOUSE)	1318
OPT. REC. ROOM	662
OPT. DEN	308
OPT. BATH	49
OPT. EXERCISE ROOM	221
OPT. FINISHED STORAGE CLOSET	79
EXT. REC. RM. W/ 6' LIBRARY EXT.	+ 79
EXT. REC. RM. OPT. 6' FAMILY ROOM EXT.	+ 106
EXT. REC W/ OPT. REAR SUNROOM	+ 153
EXT. REC W/ OPT. 12' MORNING ROOM ONLY	(+ 7)
EXT. DEN W/ OPT. 12' MORNING ROOM	+ 226
EXT. DEN W/ COMBO OPT. 12' MR & 6' FAMILY RM. EXT.	(+ 13)
EXT. REC W/ COMBO OPT. 12' M.R. & 6' F.R. & SUNROOM	(- 5)
EXT. EXERCISE RM. W/ COLONIAL ELEVATION	+ 25
EXT. STORAGE CLOSET W/GEORGIAN ELEVATION	+ 15
EXT. EXERCISE RM. W/ VICTORIAN ELEVATION	+ 25
EXT. EXERCISE RM. W/ ELEVATION A & B	+ 25
EXT. STORAGE CLOSET W/ ELEVATION A & B	+ 7

SQUARE FOOTAGE CHART (CONT'D)	
NAME	AREA
GARAGE 2-CAR	464
GARAGE 2-CAR (W/ ELEVS A & B)	+ 42
GARAGE 3-CAR SIDE LOAD (ANY ELEVATIONS)	+ 168
GARAGE 3RD CAR FRONT LOAD	+ 227
UNFINISHED BASEMENT (BASE HOUSE)	1748
UNFIN. BSMT. W/ COLONIAL ELEVATION	+ 55
UNFIN. BSMT. W/ COUNTRY ELEVATION	+ 55
UNFIN. BSMT. W/ GEORGIAN ELEVATION	+ 22
UNFIN. BSMT. W/ ELEVATION	+ 0
UNFIN. BSMT. W/ 6' LIBRARY EXT.	+ 79
UNFIN. BSMT. W/ OPT. 6' FAMILY ROOM EXT.	+ 114
UNFIN. BSMT. W/ OPT. 12' MORNING ROOM	+ 244
UNFIN. BSMT. W/ OPT. REAR SUNROOM	+ 161
UNFIN. BSMT. W/ COMBO OPT. 12' M.R. & 6' FAMILY RM. EXT.	(- 3)
UNFIN. BSMT. W/ COMBO OPT. 12' M.R. & 6' F.R. & SUNROOM	(- 6)
UNFIN. BSMT. W/OPT. SIDE CONSERVATORY	+ 252
UNFIN. BSMT. W/OPT. FIRST FLOOR SUITE W/ BATH	+ 331
UNFIN. BSMT. W/OPT. FIRST FLOOR SUITE 2 W/ BATH	+ 378
UNFIN. BSMT. W/ OPT. ALT. FIRST FLOOR SUITE W/ BATH	+ 471



MID-ATLANTIC AREA

COLORADO

REVISION DATE: 06-25-2015

1CO

2015 INTERNATIONAL RESIDENTIAL CODE

** THE LOCAL JURISDICTION SHALL FILL IN THIS TABLE WITH LOCAL CLIMATIC AND GEOGRAPHIC CRITERIA **

2015 CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA:											
GROUND SNOW LOAD	WIND SPEED (mph)		SEISMIC DESIGN CATAGORY	SUBJECT TO DAMAGE FROM			WINTER DESIGN TEMP.	ICE BARRIER UNDERLAYMENT REQUIRED	FLOOD HAZARDS	AIR FREEZING INDEX	MEAN ANNUAL TEMP
	Speed (mph)	Topographic Effects		Weathering	Frost Line Depth	Termites					

Belshew/07(42)
B15002820

ACI

KV_003_3258_COLORADO

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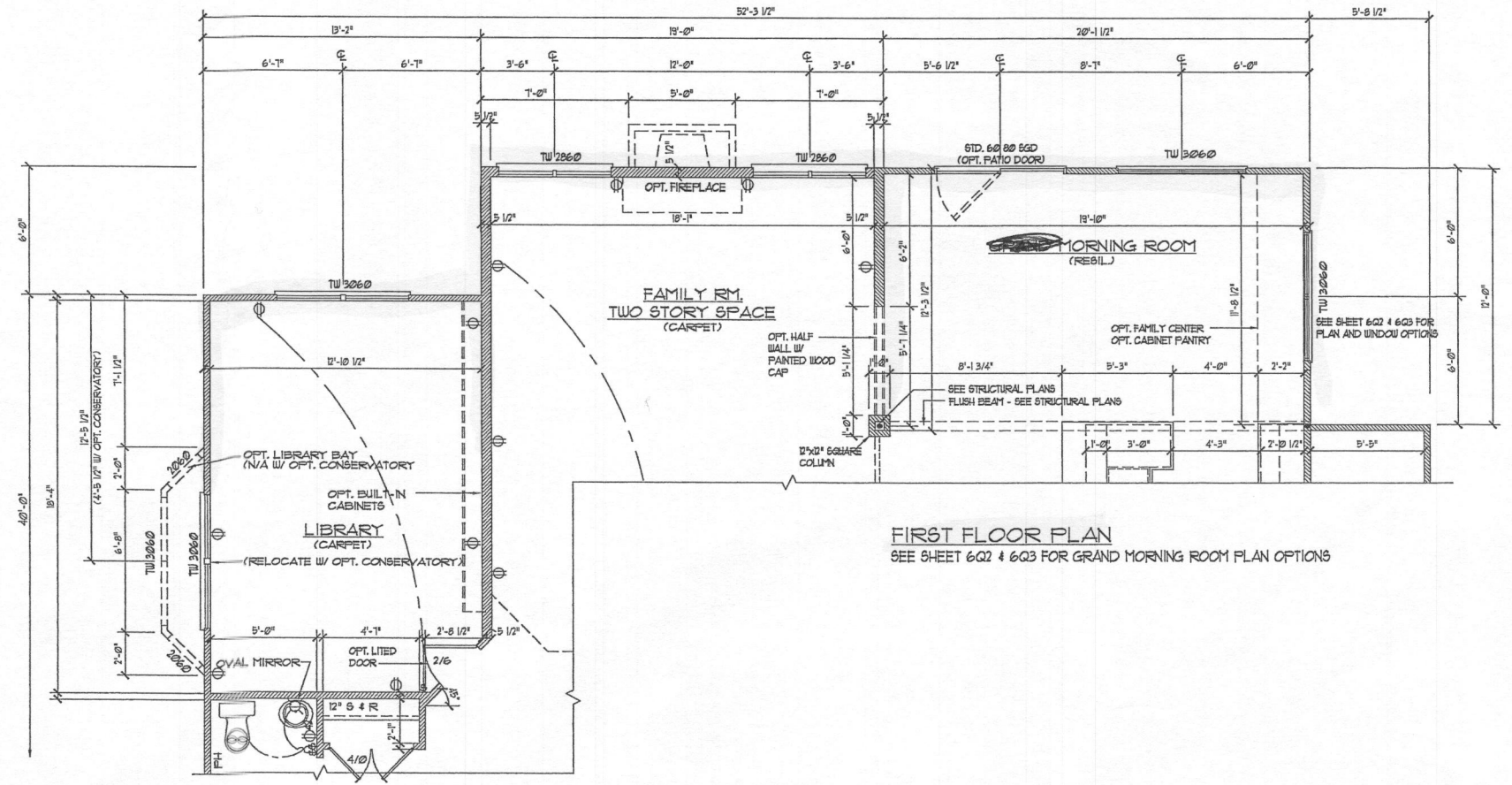
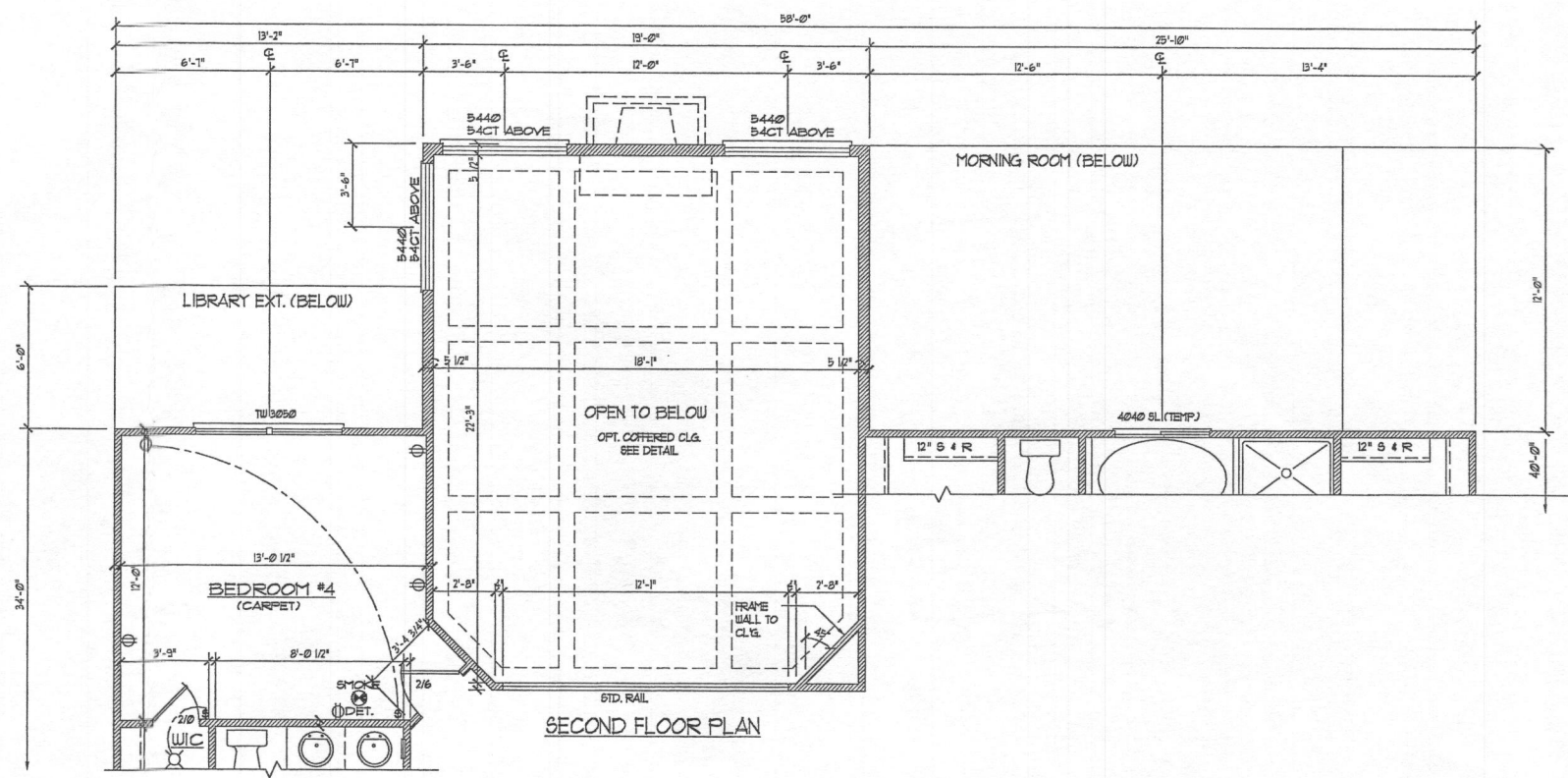
SCALE:
 1/8" = 1'-0" @ 11 x 17
 1/4" = 1'-0" @ 24 x 36

SHEET NUMBER
6L4

SCALE

DRAWN BY
ACI

DATE
07-28-14

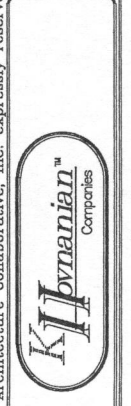


REV.#	DATE	REMARKS

REV.#	DATE	REMARKS

MODEL
COLORADO

SET #



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OPT. MORNING ROOM / 6' EXT. FAMILY ROOM / 6' LIBRARY EXT. COMB. KV_003_6L4

COLORADO