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THIS FORM WHEN DROPPING OFF ANY
AND/OR PLANS TO THE HOWARD COUNTY
INSPECTIONS, LICENSES AND PERMITS COUNTER:

Date: 1 6

To: A ARNOLD, DIUP - PLAN REVIEW (Pe) (Division) DEC 16 2016

From: T TRICHIA, HCGH (410) 740-7948 (Yc) (City Name and Telephone Number)

Subject: Pr HCGH MAB RENOVATIONS

Pr 5755 CEDAR LANE, COLUMBIA, MD 21044

Per B160004479 SDP # _____

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 _____ (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 COMMENT LETTER TO BE EMAILED 12/19/16.

Contact Person Information: (Required)

TRICHIA RICHARDS
Please Print Name

Telephone No: 410.740.7948

E-Mail Address: tricha34@jhmi.edu

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 INFORMATION AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL CONTACT YOU FOR PERMIT PICK UP. ALL PERMIT STATUS QUESTIONS SHOULD BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS SHOULD BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. 5 BUSINESS DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED.

COMMERCIAL REVISIONS # 2

Project Name: Ho Co General
Permit # B310-4479 Date: 12/16/16

Please date, initial, and advise project coordinator when last review is complete.

ASA/SLG _____ DEC _____

APH _____ JOSE _____

JDH _____

Revision #2

copy to Health

B16004479

Arnold, Andrew

From: Tre Richardson <tricha34@jhmi.edu>
Sent: Monday, December 19, 2016 11:11 AM
To: Arnold, Andrew
Cc: 'Evan P. Hughes'
Subject: HCGH MAB Renovations - 5575 Cedar Lane Columbia, MD

Follow Up Flag: Follow up
Flag Status: Flagged

Good Morning Andrew,

I am writing you to summarize the changes to the revised drawing set submitted Dec. 16, 2016 for building permit #B160004479; MAB Renovations. Below lists scopes of work that have been removed; these scopes of work may be revisited at a later time when full renovations of the MAB Basement Level is submitted under a separate building permit application. The scopes removed is as follows:

1. **Rooftop Air Handling Units serving the basement and associated:**
 - a. Fall protection.
 - b. Structural and Architectural openings and shafts.
 - c. Electrical support for AHU's

2. **Fire Protection service including:**
 - a. Underground piping from buried mains to building.
 - b. Fire protection valving in basement.
 - c. Distribution piping to separate (future) sprinkler zones.
 - d. Architectural closet for valving.

Please let me know if you have any questions or concerns. I have copied the engineering team on the project as well.

Thank you for your time and consideration.

Tremayne Richardson
Sr. Project Mgr. JHHS Facilities D&C
Howard County General Hospital
Johns Hopkins Health System
Office: 410-740-7948
Cell: 443-239-9271