



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: 8/19/16

GP-17-017

Permit No.: B16003661

Building Address: 12403 All Daughters Lane
 City: Highland State: MD Zip Code: 20777
 Suite/Apt. # _____ SDP/WP/BA #: F-01-005
 Census Tract: _____ Subdivision: Gaithers Chase Overlook Estates
 Section: _____ Area: _____ Lot: 1
 Tax Map: 40 Parcel: 178 Grid: 18
 Zoning: RR-DEO Map Coordinates: _____ Lot Size: 52,439 sf

Property Owner's Name: MB Browns Bridge Court LLC
 Address: 1686 E. Gude Drive
 City: Rockville State: MD Zip Code: 20850
 Phone: _____ Fax: _____
 Email: _____
 Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Marc Quint - MB Browns Bridge Court LLC
 Address: 1686 E. Gude Drive
 City: Rockville State: MD Zip Code: 20850
 Phone: 301-762-9511 Fax: 301-610-9564
 Email: MQuint@mitchellbest.com

Existing Use: Vacant
 Proposed Use: Single Family Dwelling
 Estimated Construction Cost: \$ 354,000
 Description of Work: Hamilton II - B Elevation - 9R; 4BR; 4FB; 1HB; fireplace 2 car garage - 4' family room extension - 2' front extension
 Seeking Silver Level Certification of the NGBS-3rd party verification by Pando Allarco
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: MB Development Company LLC
 Contact Person: Marc Quint
 Address: 1686 E. Gude Drive
 City: Rockville State: MD Zip Code: 20850
 License No.: 7314
 Phone: 301-762-9511 ext. 318 Fax: _____
 Email: MQuint@mitchellbest.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 st floor: 52'	62'
	2 nd floor: 48'	62'
Area of construction (sq. ft.):	Basement: 52'	52'
	<input checked="" 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: <u>4</u> No Bedroom	
<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	RECEIVED AUG 19 2016 LICENSES & PERMITS DIVISION
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	<u>61600236</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.

Marc Quint
 Applicant's Signature
 MQuint@mitchellbest.com
 Email Address
 Operations Mgr., Mitchell & Best Homes LLC
 Title/Company

Marc Quint
 Print Name
8/19/2016
 Date

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

AGENCY	DATE	SIGNATURE OF APPROVAL
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health	<u>8/18/16</u>	<u>[Signature]</u>

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

DPZ SETBACK INFORMATION

Front: 50
 Rear: 30
 Side: 10
 Side St.: 5

All minimum setbacks met? Yes No
 Is Entrance Permit Required? Yes No
 Historic District? Yes No
 Lot Coverage for New Town Zone: [initials]
 SDP/Red-line approval date: _____

Filing Fee	\$ <u>100</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50</u>
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>002119</u>

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

MITTU → NO

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

Date: 10/11/16 Health Dept.

To: Dana Bernard - Well & Septic Program
(Person's Name and Division)

From: Marc Quint Mitchell Best (301) 762-9511 ext. 318
(Your Name, Company Name and Telephone Number)

Subject: Project name Orchard Estates
Project site address 12403 All Daughters Lane
Permit # B16003661 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 Floor Plans pages as requested with Bedroom note

Contact Person Information: (Required)

Marc Quint
Please Print Name

Telephone No: 301-762-9511 ext. 318
E-Mail Address: MQuint@MitchellBest.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 [Signature]

DILP 2016 OCT 11 AM 9:58

Marc Quint

From: Bernard, Dana <dbernard@howardcountymd.gov>
Sent: Monday, October 03, 2016 2:44 PM
To: Marc Quint
Subject: 12403 All Daughters Lane - B16003661

Marc, Per our conversation today in our office:

I have reviewed the floor plans in support of Building Permit B16003661 for a new home at 12403 All Daughters Lane. As you know this property has bedroom limitations of 4 bedrooms. There is a rough-in for a full bathroom in the unfinished basement and please note that this makes it very likely for one or more rooms to be considered bedrooms upon conversion of the basement to finished living space. However, you can add the following note to the proposed floor plans and to the BAT plan: *As this lot is limited with a **four** bedroom limitation, any future building permit for converting all or a portion of the basement into finished living space may be denied by the Health Department if the total number of proposed bedrooms in the dwelling exceeds **four**.* This note must be added and new floor plans and must be submitted to DILP. If you have any additional questions don't hesitate to send me an e-mail.

Thanks
Dana Bernard

From: Bernard, Dana
Sent: Friday, September 30, 2016 11:13 AM
To: 'Marc Quint'
Subject: RE: 12403 All Daughters Lane - B16003661

Marc,

You must provide me with floor plans that show the exact number of bedrooms. Your plan clearly shows 5 bedrooms with and in-law suite. Your BAT plan only has calculation for 4 bedroom house. These plans must be submitted to DPZ so we can have them on record. The number of Bedrooms in the floor plans and the BAT plans must match. If you have any questions don't hesitate to shoot me an email.

Dana

From: Marc Quint [<mailto:mquint@mitchellbest.com>]
Sent: Friday, September 30, 2016 11:02 AM
To: Bernard, Dana
Subject: RE: 12403 All Daughters Lane - B16003661

Hi Dana:

Just checking in to make sure there are not any other issues for this permit.

Thanks, Marc

From: Marc Quint
Sent: Tuesday, September 27, 2016 8:45 AM



Bureau of Environmental Health

8930 Stanford Blvd., 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](https://twitter.com/HowardCoHealthDep)

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

DATE: September 2, 2016

To Applicant: MB Browns Bridge Court LLC.

C/o Marc Quint, E-mail: MQuint@mitchellbest.com

RE: **Building Permit # B16003661**

12403 All Daughters Lane

Highland, Maryland 20777

Mr. Quint,

Your building permit has not been approved and the following items must be submitted for further review.

1. On November 30, 2007 a water sample was collected during a yield test. Results from the screening indicated elevated levels for **Gross Alpha** and higher than typical for **Gross Beta**. Given the elevated findings, installation of a water softener system and / or reverse osmosis system will likely be necessary. If you elect to install treatment upfront, only a post short and long term **Gross Alpha** and **Beta**, plus a post **Radium 226/228** will be needed to properly evaluate the effectiveness of the installed treatment. Given that it typically takes up to one month to perform and receive back the **Radium** analyses, plan accordingly. Also note this is in addition to other standard testing parameters (bacteria, nitrate, turbidity and sand) that will still be required to help secure Use and Occupancy. **This requirement will not interfere with building permit approval.**
2. Floor plans are needed for the proposed house.
3. Bat plans are needed for the proposed house.

I have attached the BAT preparation guide and if you have an additional questions don't hesitate to give me a call.

Respectfully,

Dana Bernard

Dana Bernard, REHS/RS

Environmental Sanitarian II

Bureau of Environmental Health

Phone (410) 313-2775

E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file