



# 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: 6/29/16

Permit No.: B16002919

Building Address: 12191 Hayland Farm Way  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: 21043  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Walden Creek  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 102  
 Tax Map: \_\_\_\_\_ Parcel: 407 Grid: 11  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 13,777

Existing Use: Walden Creek  
 Proposed Use: \_\_\_\_\_  
 Estimated Construction Cost: \$ 200,000  
 Description of Work: 1st floor addition, 11' x 11' deck  
mark - 1st floor addition, 11' x 11' deck  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_  
 Address: 10000 49th  
 City: Crofton State: MD Zip Code: 21114  
 Phone: 410-313-2455 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: \_\_\_\_\_  
 Address: 12191 Hayland Farm Way  
 City: Crofton State: MD Zip Code: 21043  
 Phone: 410-313-2455 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Company: CRAFTMARK  
 Contact Person: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: \_\_\_\_\_  
 Phone: \_\_\_\_\_ 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 <sup>st</sup> floor:	
	2 <sup>nd</sup> 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: <u>1</u>	
<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 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 type="checkbox"/> Private	
Electric: <input 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	
Grading Permit Number: <u>616000180</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: \_\_\_\_\_ Print Name: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Date: 6/29/16  
 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>7/8/16</u>	<u>[Signature]</u>

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

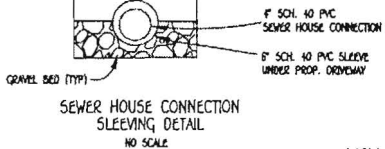
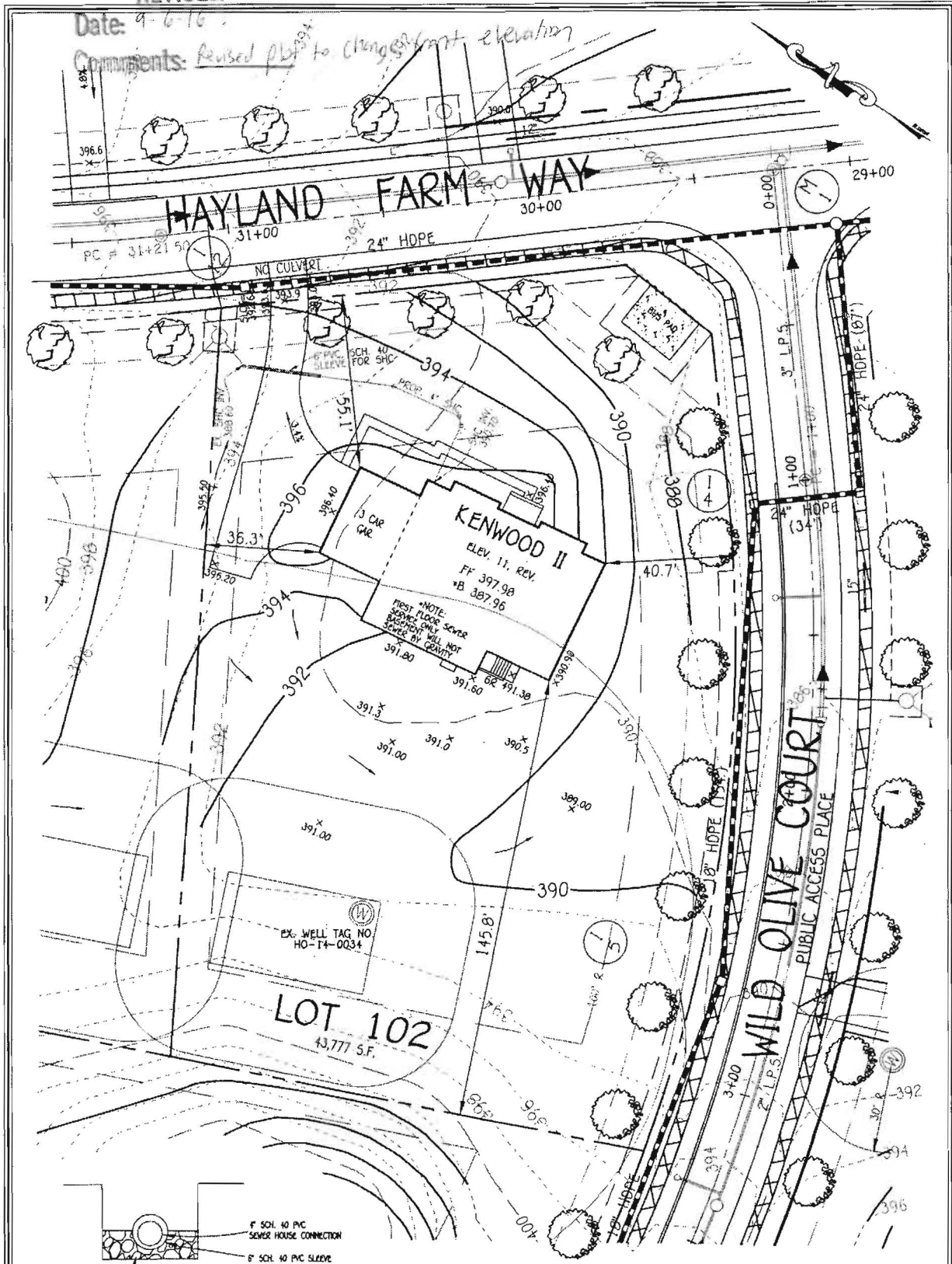
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot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

Filing Fee	\$ <u>107.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50.00</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>6007B-6008</u>

REVISED

Date: 9-6-16

Comments: Revised plan to change front elevation



PLAN  
SCALE: 1"=30'

WELL CERTIFICATION:  
THE EXISTING WELL, TAG NO. HO-14-0034, HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN.

PERMIT SITE PLAN  
LOT 102  
12191 HAYLAND FARM WAY  
WALNUT CREEK

**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 14272 BALTIMORE NATIONAL PIKE  
ELLSWORTH CITY, MARYLAND 21042  
(410) 461-2095

OWNER  
BY BUSINESS TRUST  
P.O. BOX 482  
LISBON, MARYLAND 21765-0482

ZONED: RC-DEO  
TAX MAP NO.: 28 PARCEL NO. 49 GRID NO.: 17 & 18  
FIFTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
SCALE: 1" = 30' DATE: AUGUST 4, 2016

Name: Rachel Carr / CPS  
Street Address: 6557 Ballymore Ln.  
City, State, Zip: CLARKSVILLE MD 21029  
Date: 9/2/16

Amendment, Permit # B16002919

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

RECEIVED  
SEP 02 2016  
LICENSES & PERMITS  
DIVISION

Dear Ms. Whalen:

I am requesting to amend Permit # B16002919 at  
Amend elevation to 11 to  
renovated plot + new architectural  
attached

Enclosed:

- Fee: 50
- Plot Plans
- Sets of Construction Drawings
- Other: \_\_\_\_\_

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

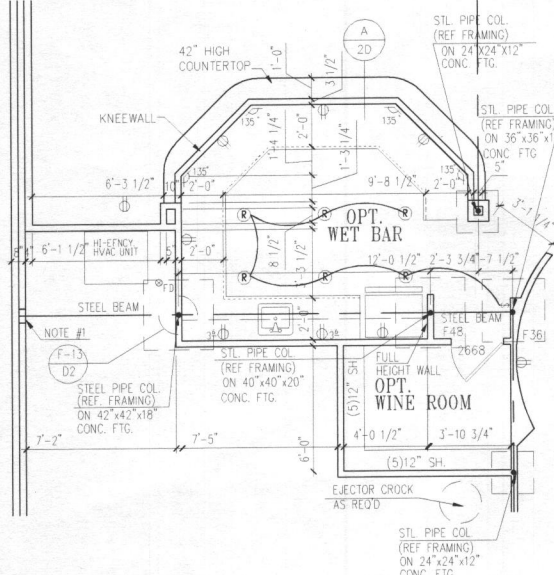
Sincerely,

Name: Rachel Carr, CPS  
Title: owner/permit runner  
Phone: 240-988-7309  
Email: Carrache@gmail.com

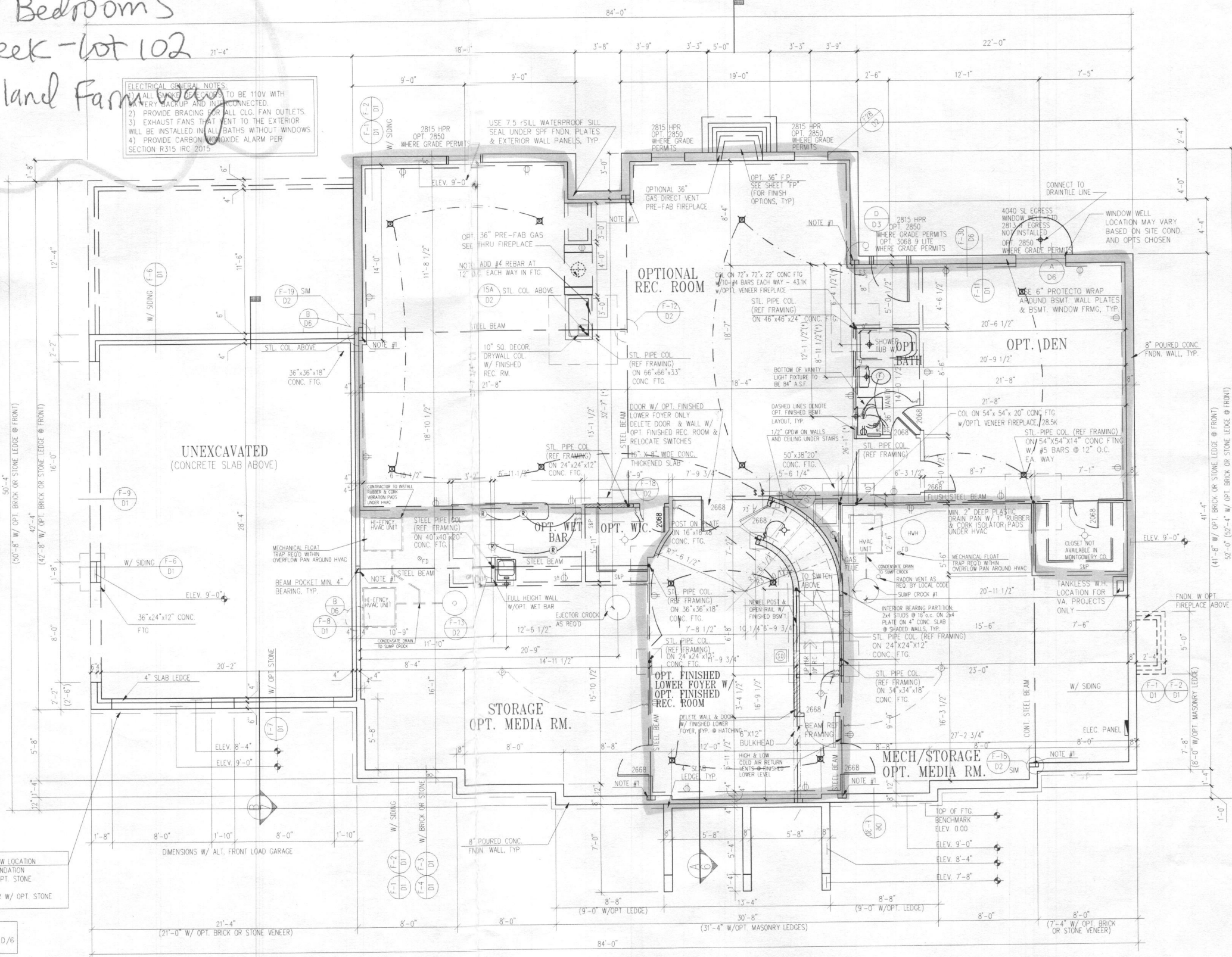
= Finished Areas  
 5 Bedrooms  
 Walnut Creek - lot 102  
 12191 Hayland Farm Way

**ELECTRICAL GENERAL NOTES:**  
 1) ALL SWING ELECTRIC TO BE 110V WITH  
 BATTERY BACKUP AND INTERCONNECTED.  
 2) PROVIDE BRACING FOR ALL CLG. FAN OUTLETS.  
 3) EXHAUST FANS THAT VENT TO THE EXTERIOR  
 WILL BE INSTALLED IN ALL BATHS WITHOUT WINDOWS.  
 4) PROVIDE CARBON MONOXIDE ALARM PER  
 SECTION R315 IRC 2015.

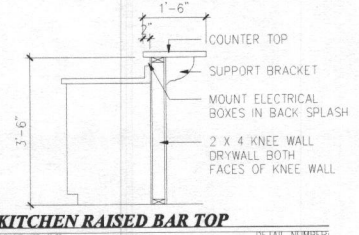
**NOTES:**  
 #1 - USE STEEL SHIMS ONLY AT BEAM  
 POCKETS AND ALL STEEL COLUMN  
 LOCATIONS. (NO BRICK SHIMMING)  
 #2 - BOLT TOP OF ADJ. STEEL COLUMN  
 TO BOTTOM OF STEEL I-BEAM BEFORE  
 FRAMING FINISHED LOWER LEVELS.



OPT. WET BAR W/ ALTERNATE  
 FLOOR PLANS  
 AVAILABLE W/ ALT. FOUNDATION PLAN ONLY  
 1/4" = 1'-0"



**FOUNDATION/BASEMENT FLOOR PLAN**  
 W/ OPT. EXTENDED STUDY @ FIRST FLOOR OR ALTERNATE FIRST FLOOR  
 SHOWN W/ ELEVATION #6  
 UNLESS OTHERWISE NOTED SET WINDOW HEAD HEIGHT @ 6'-8" ABOVE TOP OF SLAB  
 1/4" = 1'-0"



**KITCHEN RAISED BAR TOP**  
 SCALE: 1/2" = 1'-0"  
 DETAIL NUMBER:

**PINNACLE DESIGN & CONSULTING INC.**  
 ARCHITECTURE • PLANNING • CONSULTING • MARKET ANALYSIS • BROCHURES  
 11150 Fairfax Blvd. • Suite 402 • Fairfax, Virginia 22030  
 PH: 703.216.1400 • Web Site: www.pdc-home.com

**FNDN / BSMT PLAN w/ ALT. EXT. STUDY**  
**CRAFTMARK HOMES / KENWOOD II**

DRAWN BY: RTS  
 1/4/2001

REV. #	DATE
REV. #3	10/05/2012
ACR #1001	10/05/2012
REV. #4	07/29/2013
ACR #1019	08/29/2013
REV. #5	09/27/2013
ACR #1024	10/22/2013
ACR #1038	03/13/2014
REV. #6	08/21/2014
REV. #9	10/16/2014
REV. #10	08/05/2015

PS4002D  
 SHEET NO.

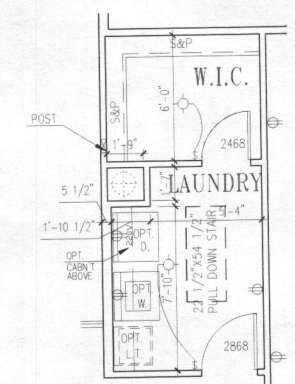
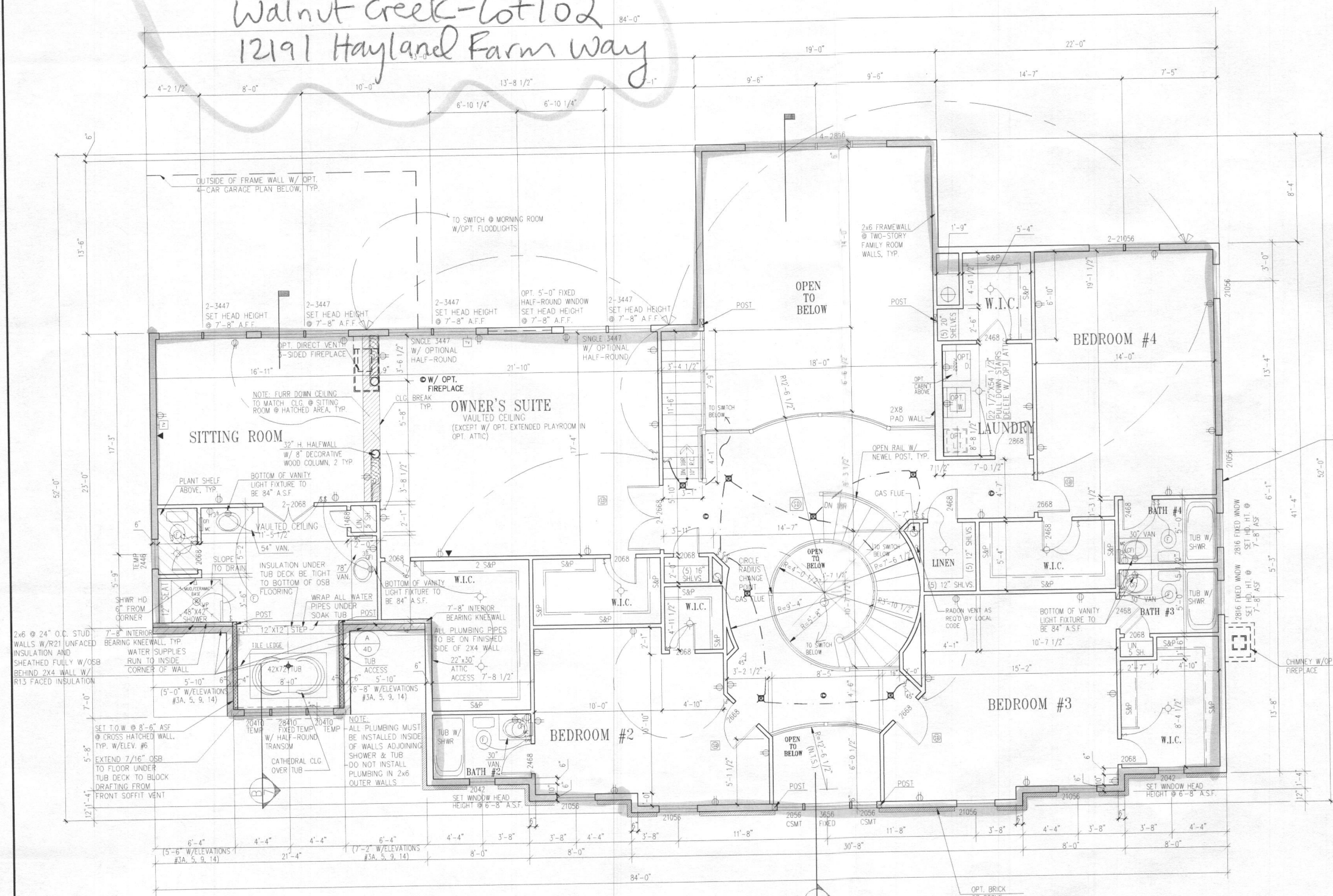
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I CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME AND THAT I AM A DULY LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NUMBER 9438, EXPIRATION DATE 03/09/17.

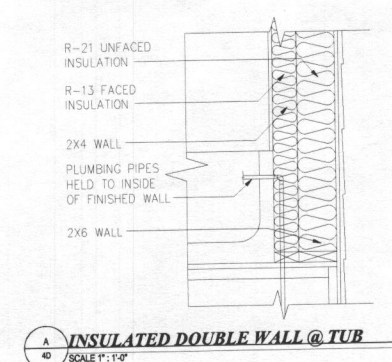


Finished Areas  
 5 Bedrooms  
 Walnut Creek-Lot 102  
 12191 Hayland Farm Way



PART. PLAN W/ OPT.  
 SEE-THRU FIREPLACE  
 @ FIRST FLOOR  
 1/4"=1'-0"

NOTE:  
 1) WASHING MACHINE WILL ALWAYS BE ON THE LEFT, DRYER WILL ALWAYS BE ON THE RIGHT, EVEN IN THE REVERSE PLAN.



OPT. ALT. UPPER FLOOR W/ ALT. FLOOR PLAN

SHOWN W/ ELEVATION #6  
 UNLESS OTHERWISE NOTED WINDOW HEAD HEIGHT SHALL BE 7'-4" ABOVE SUBFLOOR

1/4"=1'-0"

NOTE:  
 WINDOWS WHERE THE OPERABLE OPENING IS LOCATED MORE THAN 72" ABOVE THE GRADE OR SURFACE BELOW SHALL HAVE THE LOWEST PART OF THE CLEAR OPENING A MINIMUM OF 24" (OR PER LOCAL CODE) ABOVE THE FINISHED FLOOR UNLESS EQUIPPED WITH AN APPROVED OPENING LIMITING OR FALL PREVENTION DEVICE.

ELECTRICAL GENERAL NOTES:  
 1) ALL SMOKE DETECTORS TO BE 110V WITH BATTERY BACKUP AND INTERCONNECTED.  
 2) PROVIDE BRACING FOR ALL CLG. FAN OUTLETS.  
 3) EXHAUST FANS THAT VENT TO THE EXTERIOR WILL BE INSTALLED IN ALL BATHS WITHOUT WINDOWS.  
 4) PROVIDE CARBON MONOXIDE ALARM PER SECTION R315 IRC 2012

REV. #	DATE
REV. #1	10/05/2012
ACR #1001	10/05/2012
REV. #4	07/29/2013
ACR #1019	06/20/2013
REV. #5	08/27/2013
ACR #1024	10/22/2013
ACR #1038	03/13/2014
REV. #8	08/21/2014
REV. #9	10/10/2014
REV. #10	06/05/2015

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