



Health

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: 6-16-15

Permit No.: B15002614

Building Address: 1890 Florence Rd
 City: Mt. Airy State: Md Zip Code: 21771
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Chelsea Knolls
 Section: _____ Area: _____ Lot: _____
 Tax Map: 12 Parcel: 78 Grid: 05
 Zoning: _____ Map Coordinates: _____ Lot Size: 29.37
Ac.

Existing Use: Mowed Field
 Proposed Use: Single Family Home
 Estimated Construction Cost: \$ 525,000.
 Description of Work: Construct 2 Story Residential Home

Occupant or Tenant: Occupant
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Donna Shapiro
 Address: 2082 Florence Rd
 City: Mt. Airy State: Md Zip Code: 21771
 Phone: 240-409-0330 Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Rhodes Construction Co., Inc
 Address: 28235 Kempton Rd
 City: Damascus State: Md Zip Code: 20872
 Phone: 301-253-3303 Fax: _____
 Email: _____

Contractor Company: Rhodes Construction Co., Inc
 Contact Person: Ken Rhodes
 Address: 28235 Kempton Rd
 City: Damascus State: Md Zip Code: 20872
 License No. 08050041984 3097 1743
 Phone: 301-471-2861 Fax: _____
 Email: Krhodes70@hotmail.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: <u>63'</u>	<u>73'</u>
Area of construction (sq. ft.):	2 nd floor: <u>57' 1/2'</u>	<u>73'</u>
Use group:	Basement:	
Construction type:	<input type="checkbox"/> Finished Basement	
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Wood Frame	No. of Bedrooms: <u>4</u>	
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>	
	No. of efficiency units:	
	No. of 1 BR units:	
	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	
<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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<u>Heating System</u>	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input checked="" type="checkbox"/> Other: <u>Heat Pump</u>	
<u>Sprinkler System:</u>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>Pending Grading</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: Joyce Rhodes
 Email Address: Krhodes70@hotmail.com
 Title/Company: Rhodes Const. Co. - Secty - Inc.

Print Name: Joyce Rhodes
 Date: 3-4-15

RECEIVED
 JUN 16 2015
 LICENSES & PERMITS DIVISION

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

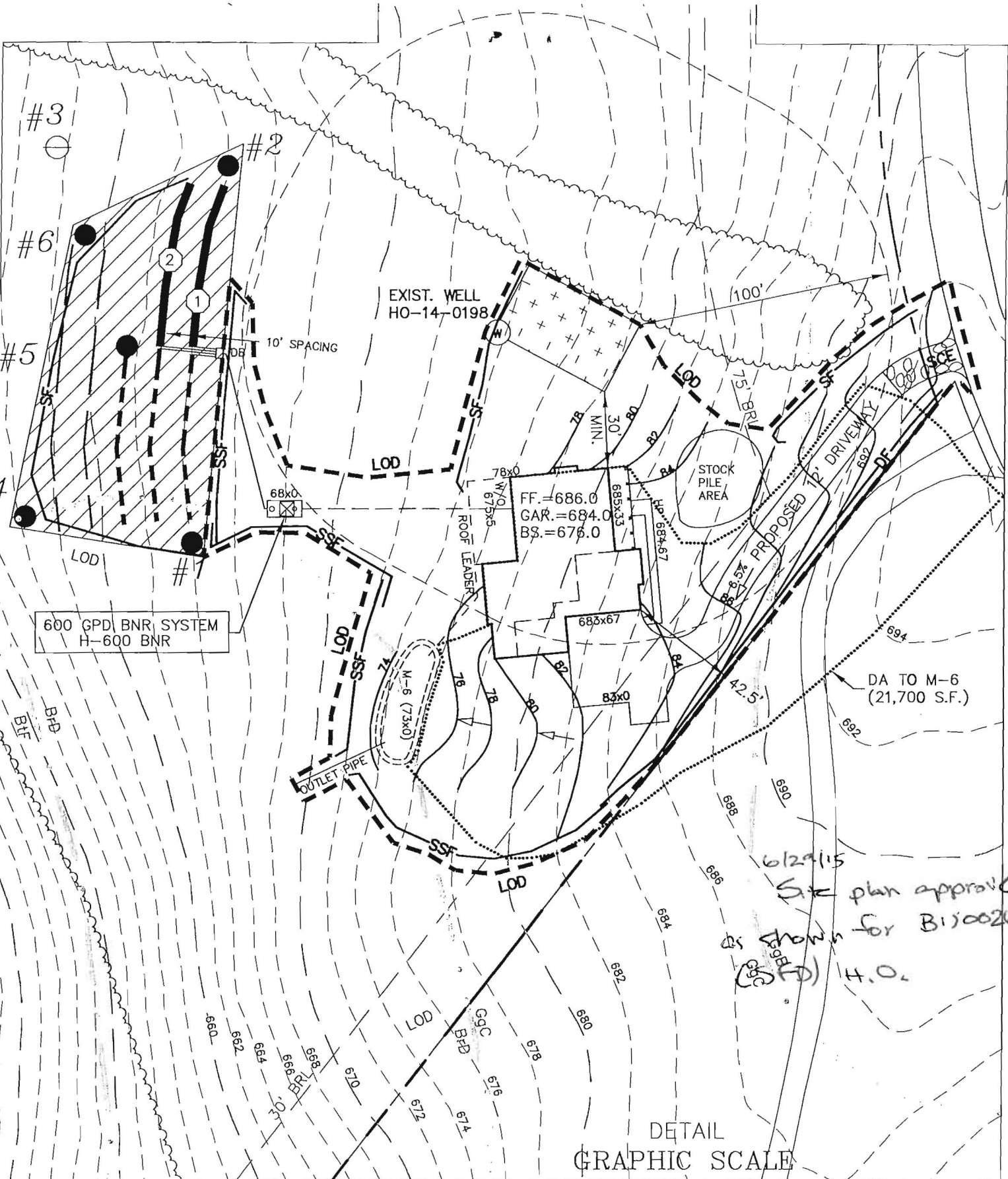
AGENCY	DATE	SIGNATURE OF APPROVAL
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health	<u>6/29/15</u>	<u>H. Orynd</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	\$ 100.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>13781</u>

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

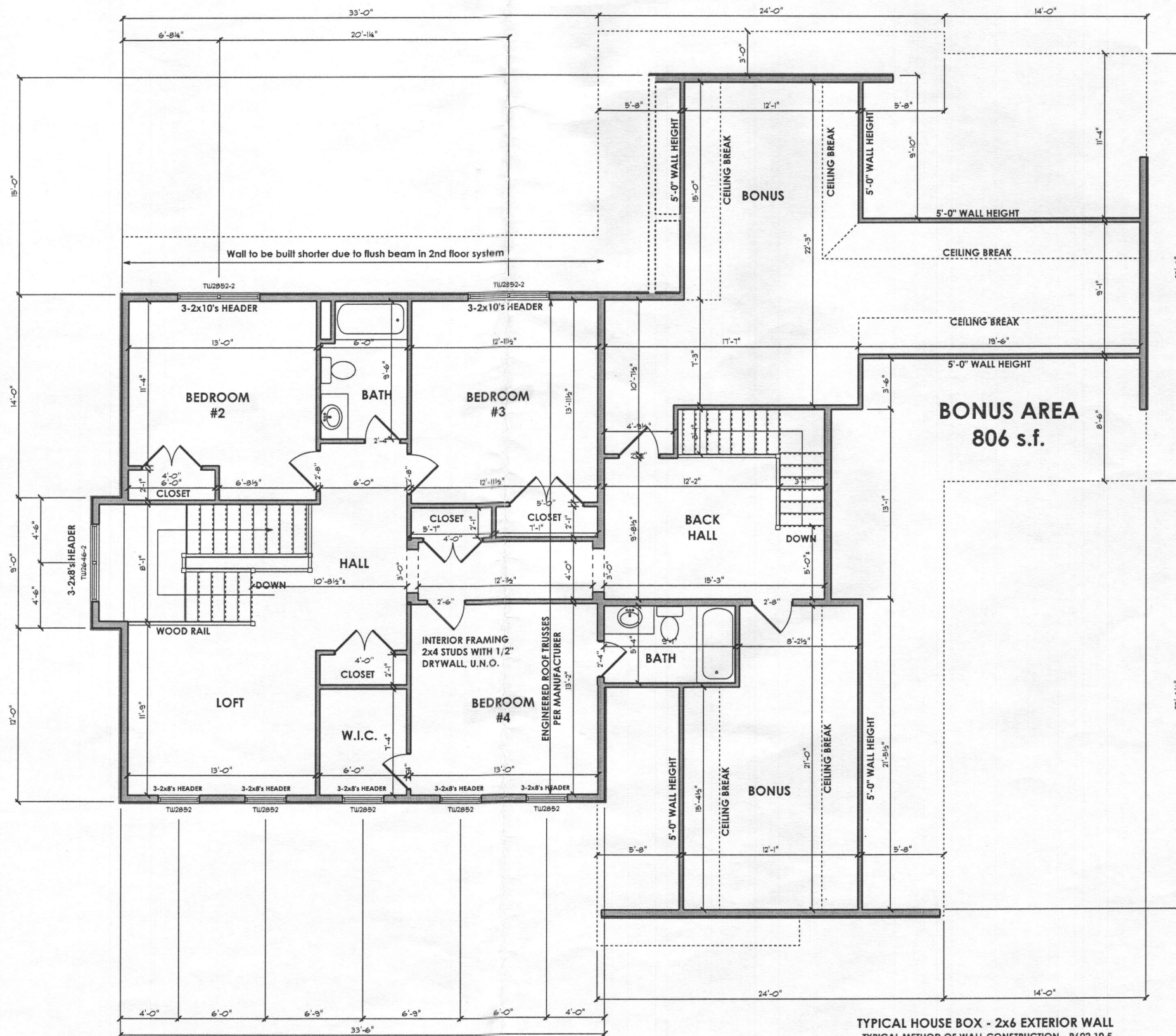


6/29/15
 Site plan approved
 as shown for B15002614
 (SCE) H.O.

DETAIL
 GRAPHIC SCALE



(IN FEET)
 1 inch = 50 ft.



TYPICAL HOUSE BOX - 2x6 EXTERIOR WALL
TYPICAL METHOD OF WALL CONSTRUCTION - R602.10.5
CONTINUOUSLY SHEATHED - WOOD STRUCTURAL PANEL

Shapiro Residence
PROPOSED RESIDENCE
2902 Florence Road, Mount Airy, Maryland 21771
1890

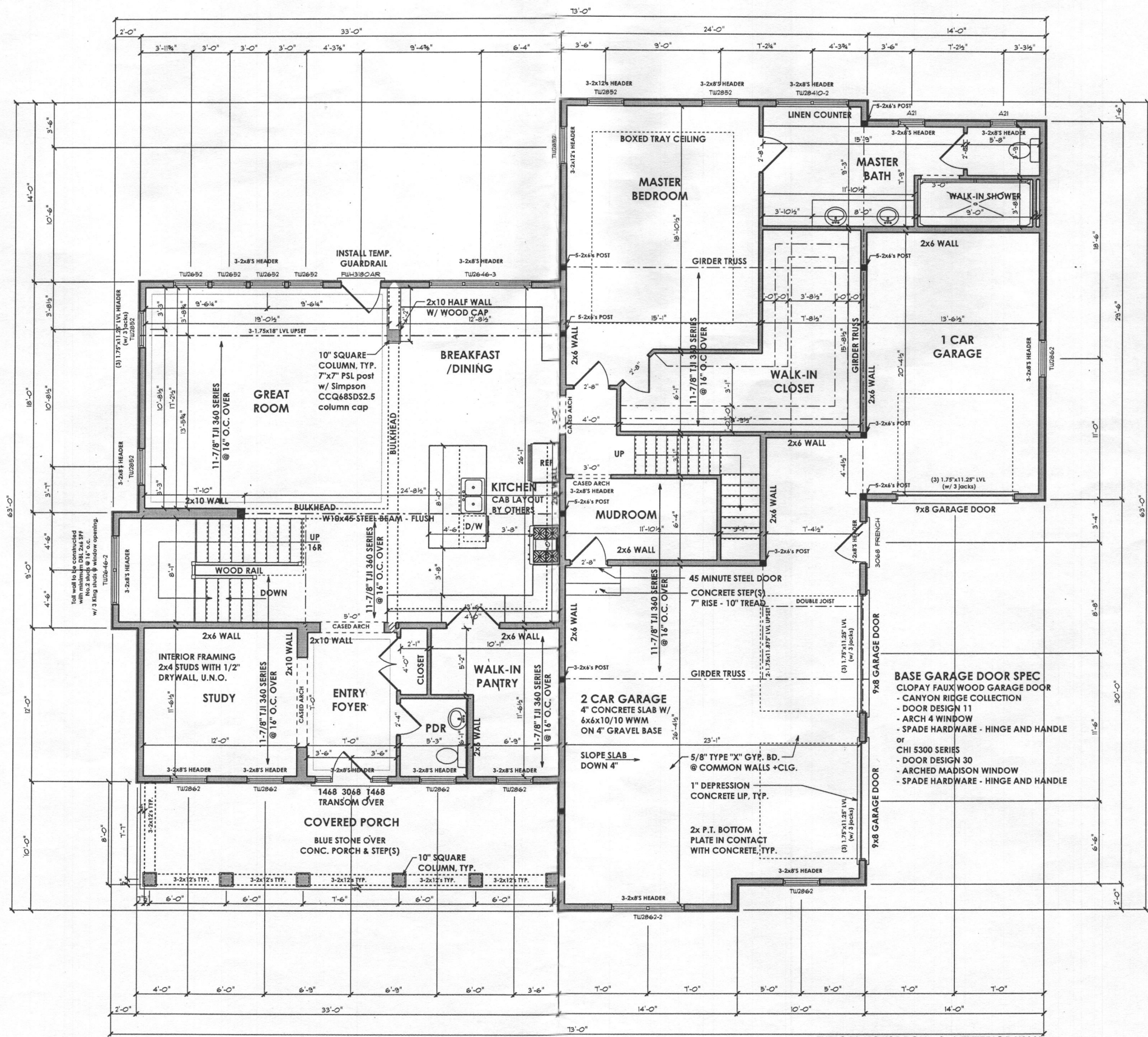
REVISIONS

▲	06-14-14	STRUCTURAL REVIEW
▲		
▲		
▲		
▲		
▲		

ISSUE DATES:
08-07-14 PERMIT REVIEW

SCALE: 1/4"=1'-0"
SECOND FLOOR

3.01
PRINT DATE:
June 25, 2015



TYPICAL HOUSE BOX - 2x6 EXTERIOR WALL
 TYPICAL METHOD OF WALL CONSTRUCTION - R602.10.5
 CONTINUOUSLY SHEATHED - WOOD STRUCTURAL PANEL

PROFESSIONAL CERTIFICATION
 I certify that these documents
 were prepared or approved
 by me, and that I am a duly
 licensed professional
 architect under the laws of the
 State of Maryland.
 License Number #14678
 Expiration Date: 6/30/2016.

Shapiro Residence
 PROPOSED RESIDENCE
 2902-Florence Road, Mount Airy, Maryland 21771

REVISIONS

1	06-14-14	STRUCTURAL REVIEW
2		
3		
4		
5		
6		
7		
8		
9		
10		

ISSUE DATES:
 08-07-14 PERMIT REVIEW

SCALE: 1/4"=1'-0"

FIRST FLOOR

3.01

PRINT DATE:
 June 25, 2015

