



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: _____

Permit No.: _____

Building Address: 5101 Honey Locust Ct
 City: EMERALD CITY State: MD Zip Code: 21043
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Wood Park III
 Section: _____ Area: _____ Lot: 45
 Tax Map: 1124 Parcel: 0049 Grid: 1011
 Zoning: _____ Map Coordinates: _____ Lot Size: 4500 sq ft

Existing Use: Residential
 Proposed Use: Residential
 Estimated Construction Cost: \$ 500,000
 Description of Work: _____

Occupant or Tenant: N/A
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 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:	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	

Property Owner's Name: La Rose
 Address: 5101 Honey Locust Ct
 City: EMERALD CITY State: MD Zip Code: 21043
 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: Stehmans
 Contact Person: _____
 Address: _____
 City: Manassas State: VA Zip Code: 20108
 License No.: _____
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: Stehmans
 Responsible Design Prof.: John Johnson
 Address: 1333 Dunbar Hollow Rd
 City: Highland State: MD Zip Code: 20771
 Phone: 301 954 1109 Fax: 301 954 1072
 Email: john.johnson@stehmans.com

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" 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 checked="" 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: _____
 Email Address: _____
 Title/Company: _____

Print Name: _____
 Date: _____

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>3/15/17</u>	<u>R. Beckler</u>

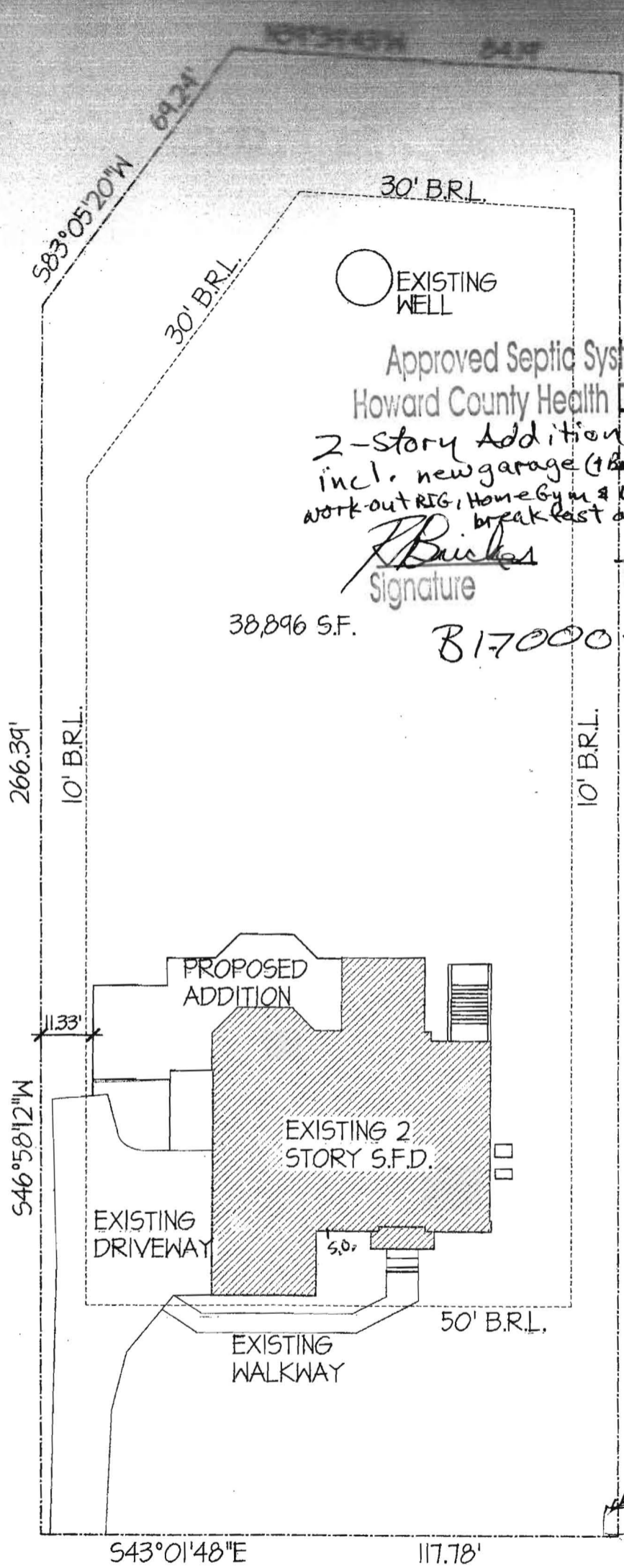
DPZ SETBACK INFORMATION

Front: _____
 Rear: _____
 Side: _____
 Side St.: _____
 All minimum setbacks met? Yes No
 Is Entrance Permit Required? Yes No
 Historic District? Yes No
 Lot Coverage for New Town Zone: _____
 SDP/Red-line approval date: _____

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

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

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



Approved Septic System Plan
Howard County Health Department

2-story Addition w/ Basement
incl. new garage (1 bay), golf cage
work-out RTG, Home Gym & Weight Room, pantry
breakfast area in expanded kitchen
& expanded
owner's Suite
NO NEW Bedroom
reB

J. Bailes
Signature

3/15/17
Date

38,896 S.F.

817000 710

Grinder Pump
in Pat reB 3/15/17

5107 Honey Locust @
Ellicott City, MD
21042

SITE PLAN

SCALE: 1" = 30'

PROPOSED ADDITION AND MODIFICATIONS TO THE LAROSE RESIDENCE

5107 HONEY LOCUST COURT, CLARKSVILLE, MD 21029

OK!

reB
3/15/12

PROFESSIONAL SEAL
 ARCHITECT
 LEHMAN ASSOCIATES, P.C.
 8

PROJECT DIRECTORY

CLIENT & HOMEOWNERS:

JASON AND KIMBERLY LAROSE
5107 HONEY LOCUST COURT
CLARKSVILLE, MD 21029

ARCHITECT:

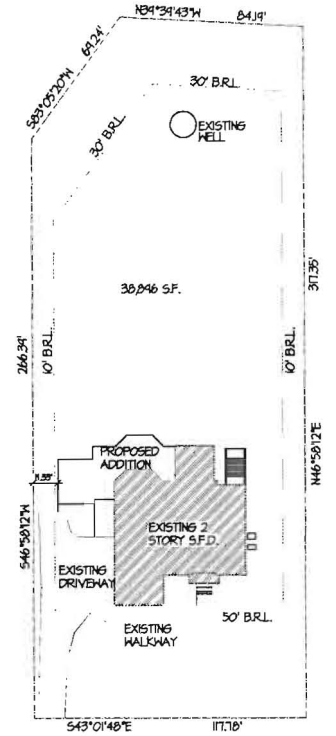
LEHMAN ASSOCIATES, P.C.
6888 MINK HOLLOW ROAD
HIGHLAND, MD 21077
PHONE 301-854-1109

GENERAL CONTRACTOR:

TO BE DETERMINED



PROPOSED FRONT ELEVATION



SITE PLAN
SCALE: 1" = 30'

LIST OF DRAWINGS

- CVR COVER PAGE AND SITE PLAN
- A-1 GENERAL NOTES
- A-2 GENERAL NOTES
- A-3 EXISTING/DEMO BASEMENT PLAN
- A-4 EXISTING/DEMO MAIN LEVEL PLAN
- A-5 EXISTING/DEMO UPPER LEVEL PLAN
- A-6 EXISTING/DEMO ELEVATIONS
- A-7 EXISTING/DEMO ELEVATIONS
- A-8 PROPOSED BASEMENT PLAN
- A-9 PROPOSED MAIN LEVEL PLAN
- A-10 PROPOSED UPPER LEVEL PLAN
- A-11 PROPOSED ELEVATIONS
- A-12 PROPOSED ELEVATIONS
- A-13 PROPOSED FIRST FLOOR FRAMING
- A-14 PROPOSED SECOND FLOOR FRAMING
- A-15 PROPOSED ROOF FRAMING
- A-16 WALL SECTIONS
- A-17 WALL SECTIONS
- A-18 WALL SECTIONS



PROPOSED REAR ELEVATION

GENERAL PROJECT SCOPE

EXPAND PARTIAL REAR OF HOUSE.
CONSTRUCT ADDITION ON SIDE OF HOUSE.
CONSTRUCT SINGLE CAR GARAGE ON SIDE OF HOUSE.
ENCLOSE OPEN FAMILY ROOM TO CREATE ADDITIONAL ROOM.
ADD FINISHED ROOM IN BASEMENT.

BUILDING DATA	
EXISTING RESIDENCE	• 4164 SF
EXISTING GARAGE	• 1071 SF
NEW EXPANSION	• 843 SF
NEW GARAGE	• 320 SF
TOTAL	• 6398 SF
TOTAL GARAGES	• 1071 SF

REVISIONS	DATE

PROPOSED ADDITIONS AND MODIFICATIONS
JASON & KIMBERLY LAROSE

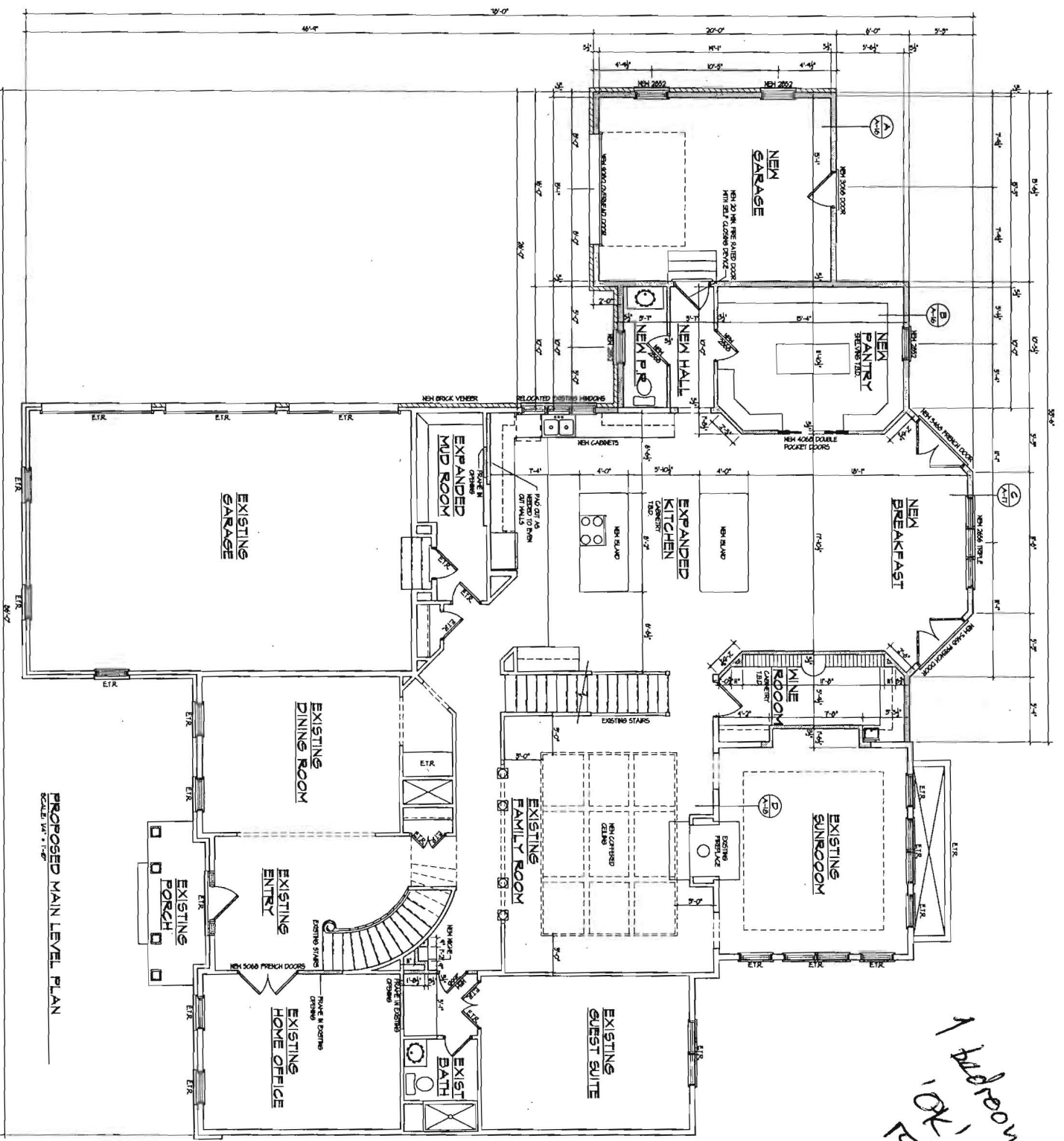
5107 HONEY LOCUST COURT, ELLICOTT CITY, MARYLAND 21042

SEAL
PROJ. NO.
DRAWN BY: REL
DATE: 01-04-2011
SHEET NAME
COVER PAGE
SITE PLAN

CVR

PROFESSIONAL CERTIFICATION: I CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A DAILY LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NUMBER 1270, EXPIRATION DATE: 4-8-10.

LEGEND
 DASHED WALLS TO BE REMOVED
 DOTTED WALLS TO REMAIN
 SOLID WALLS TO REMAIN
 SOLID WALLS TO BE ADDED



*1 bedroom
 OK 3/15/12
 JKL*

PROPOSED MAIN LEVEL PLAN
 SCALE: 1/4" = 1'-0"

PROFESSIONAL CERTIFICATION I CERTIFY THAT THESE PLANS WERE PREPARED BY ME OR UNDER MY CLOSE PERSONAL SUPERVISION AND THAT I AM A LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF MARYLAND UNDER NUMBER 3933, EXPIRES JANUARY 15, 2013.

PROJ. NO.	5107
DESIGNED BY	RELL
DATE	01-04-2011
SHEET NAME	NEW MAIN LEVEL PLAN
SHEET NO.	A-9

**PROPOSED ADDITIONS AND MODIFICATIONS.
 JASON & KIMBERLY LAROSE**

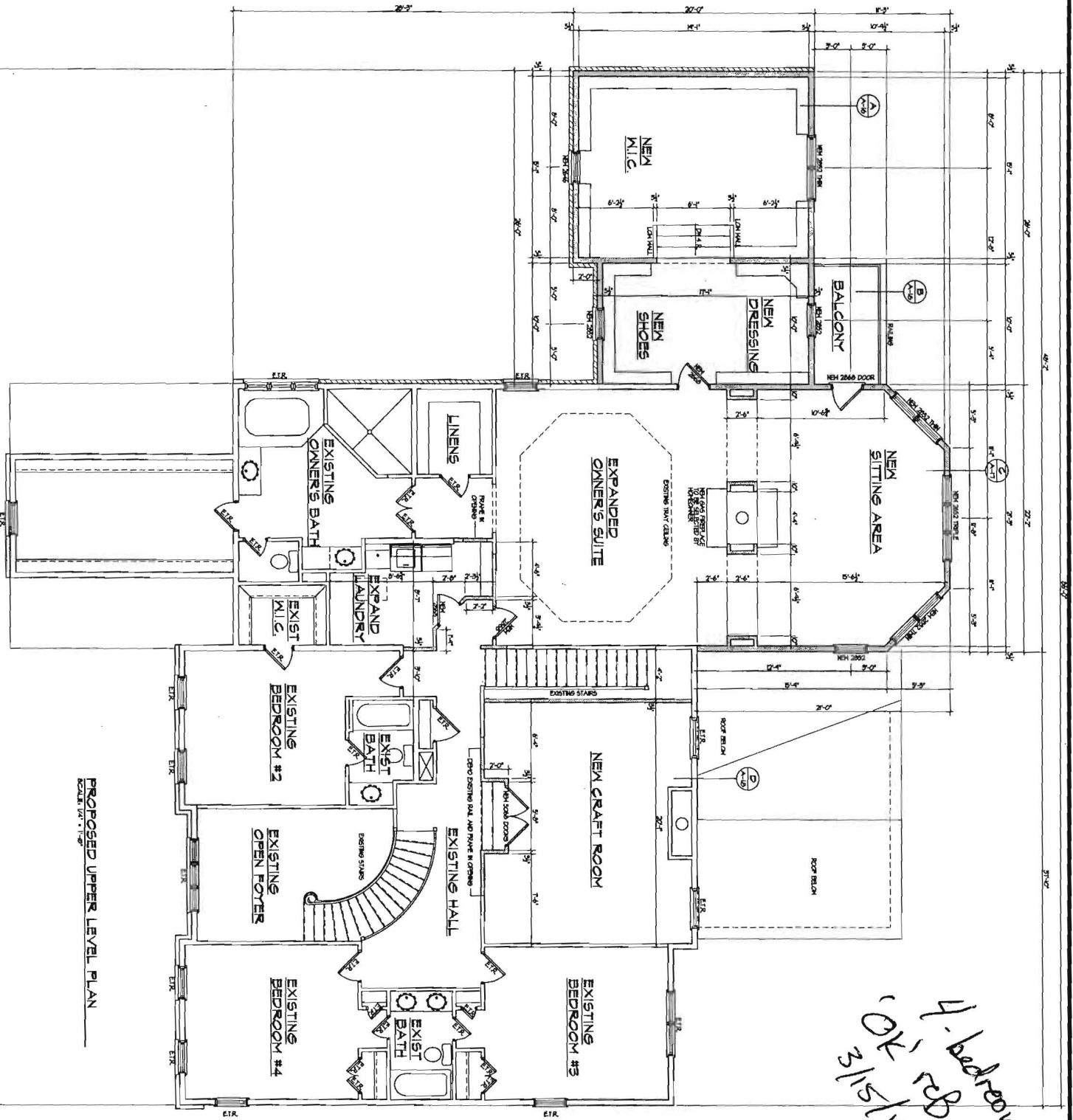
5107 HONEY LOCUST COURT, ELLICOTT CITY, MARYLAND 21102

REVISIONS	DATE

LEHMAN ASSOCIATES, PC
 ARCHITECTS
 10000 Parklands Blvd.
 Columbia, MD 21044
 410-326-1000
 www.lehmanpc.com

LEGEND

DASHED LINE TO BE REMOVED
 DOTTED LINE TO BE REMOVED
 SOLID LINE TO REMAIN
 THICK SOLID LINE TO REMAIN TO BE FINISHED TO FINISH

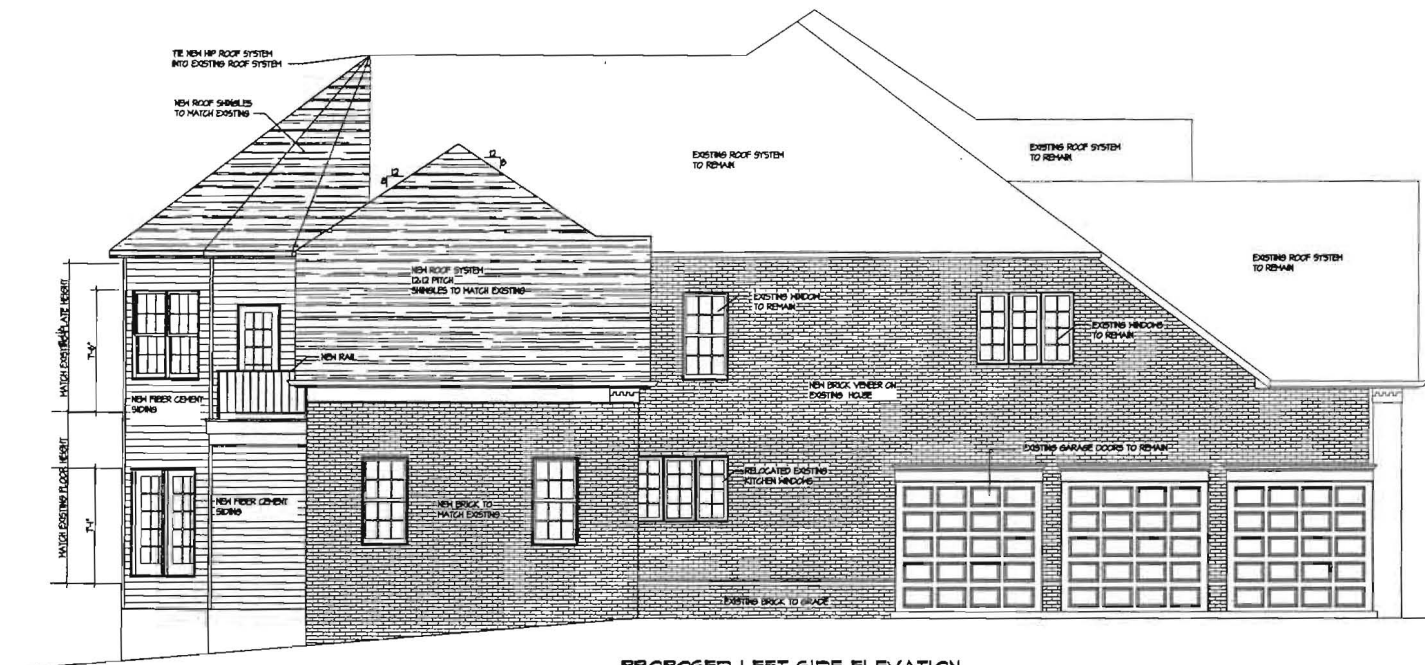


PROPOSED UPPER LEVEL PLAN
SCALE: 1/4" = 1'-0"

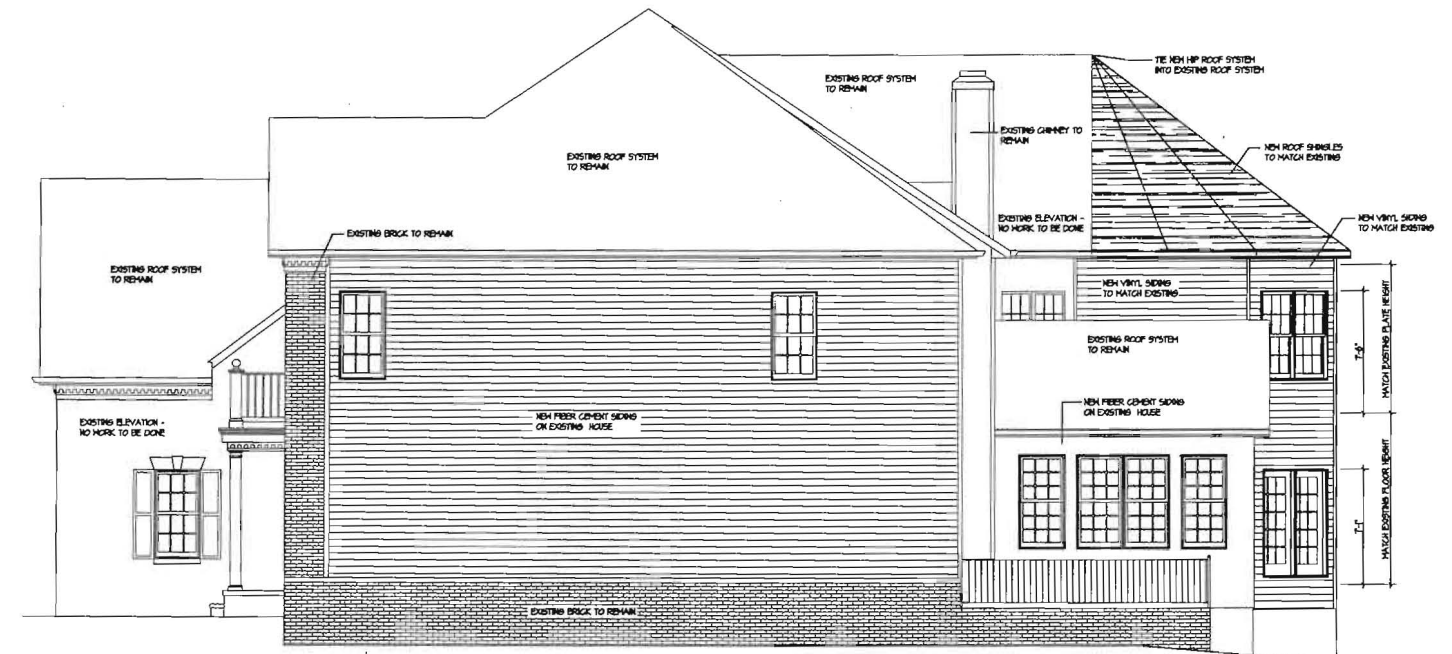
Handwritten note: 4-bedroom
OK 1/15/17

PROFESSIONAL CERTIFICATION I CERTIFY THAT THESE DOCUMENTS HAVE BEEN PREPARED OR APPROVED BY ME OR UNDER MY CLOSE PERSONAL SUPERVISION AND THAT I AM A LICENSED ARCHITECT IN THE STATE OF MARYLAND LICENSE NUMBER 7750 EXPIRATION DATE 4-30-16.

<p>A-10</p>	<p>PROPOSED ADDITIONS AND MODIFICATIONS JASON & KIMBERLY LAROSE</p>	<p>5107 HONEY LOCUST COURT, ELLICOTT CITY, MARYLAND 21042</p>	<p>REVISIONS</p>	<p>DATE</p>	<p>EA PC LEHMAN ASSOCIATES, PC Architects</p> <p>4800 Lakes Parkway Rd. Highland, MD 20777 Tel: 301-981-1100 Fax: 301-981-1078 www.lehman.com</p>
	<p>PROJ. NO.</p> <p>DRAWN BY: REL</p> <p>DATE: 01-04-2017</p> <p>SHEET NAME NEW UPPER LEVEL PLAN</p>	<p>SEAL</p>	<p>REVISIONS</p>	<p>DATE</p>	



PROPOSED LEFT SIDE ELEVATION
SCALE: 1/4" = 1'-0"



PROPOSED RIGHT SIDE ELEVATION
SCALE: 1/4" = 1'-0"

PROFESSIONAL CERTIFICATION: I CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A DAILY LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NUMBER 1730, EXPIRATION DATE: 4-3-16.

DATE	8
REVISIONS	
PROPOSED ADDITIONS AND MODIFICATIONS JASON & KIMBERLY LAROSE 5107 HONEY LOCUST COURT, ELLICOTT CITY, MARYLAND 21042	
SEAL	
PROJ. NO.	
DRAWN BY: REL	
DATE: 01-04-2011	
SHEET NAME	
NEW LEFT & RIGHT SIDE ELEVATIONS	
A-12	