



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: 5003 MORNINGSTAR DR
City: DATON State: MD Zip Code: 21036
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Renate Frady
Address: 5003 MORNINGSTAR DR
City: DATON State: MD Zip Code: 21036
Phone: 410 9775788x
Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: Rich's Construction
Address: 14549 Mustang Lane
City: Monrovia State: MD Zip Code: 21238
Phone: 410 488 0898
Email: Tom Ricciuti@virginia

Contractor Company: _____
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: _____

Existing Use: Single Family
Proposed Use: GARAGE
Estimated Construction Cost: \$ 30,000
Description of Work: SLAB ON GRADE -
GARAGE ONLY
19.5' X 29'
Occupant/Tenant Name: Renate Frady
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:	
<input checked="" type="checkbox"/> 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	

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

Print Name: _____

Email Address: _____

Date: _____

Title/Company: CONTRACTOR

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>11/2/17</u>	<u>[Signature]</u>

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

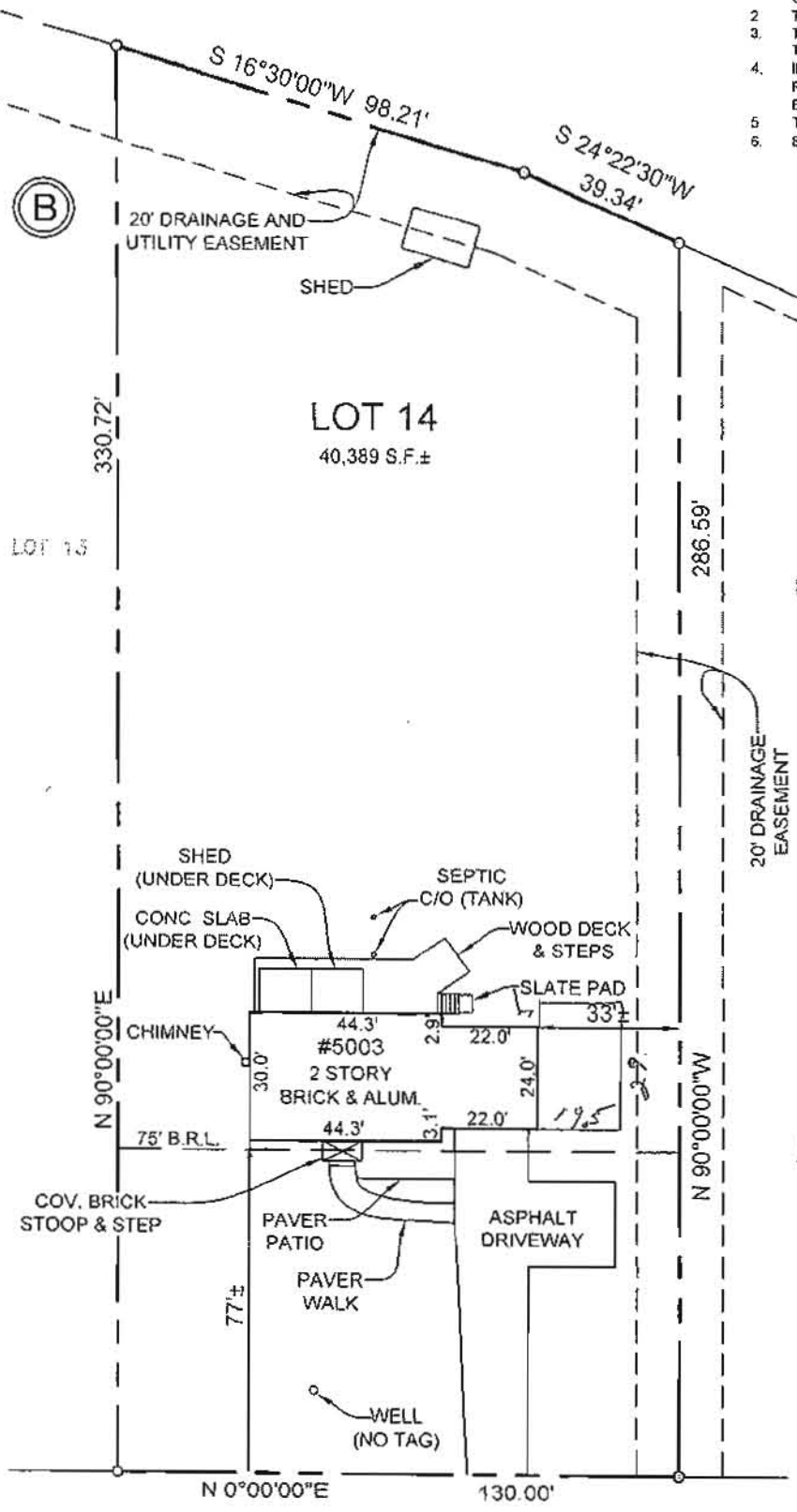
DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No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

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

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

NOTES:

1. THIS PLAT IS A BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING PURPOSES. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE STRUCTURES. THIS PLAT DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR FOR SECURING FINANCING OR REFINANCING.
2. THE +/- SETBACK ACCURACY IS 1 FOOT.
3. THIS PLAN OR PLAT IS NOT INTENDED TO SHOW ALL MATTERS RELATED TO THE PROPERTY SHOWN HEREON.
4. IF IT APPEARS ENCROACHMENTS MAY EXIST, A BOUNDARY SURVEY IS RECOMMENDED TO DETERMINE THE EXACT LOCATION OF THE PROPERTY BOUNDARY LINES AND IMPROVEMENTS.
5. THE LOCATION OF FENCE LINES, IF SHOWN, ARE APPROXIMATE.
6. B.R.L. = BUILDING RESTRICTION LINE



APPROVED
 WALK-THRU BUILDING PERMIT
 BP# _____ A# _____
 APR SAN [Signature] DATE: 11/2/17
 DESC. OF WORK: *proposed garage addition spread*

LOCATION DRAWING
 5003 MORNING STAR DRIVE
 LOT 14, BLOCK B
LINDEN CHAPEL
HILLS
 SECTION 3
 ELECTION DISTRICT NO. 5
 HOWARD COUNTY, MARYLAND

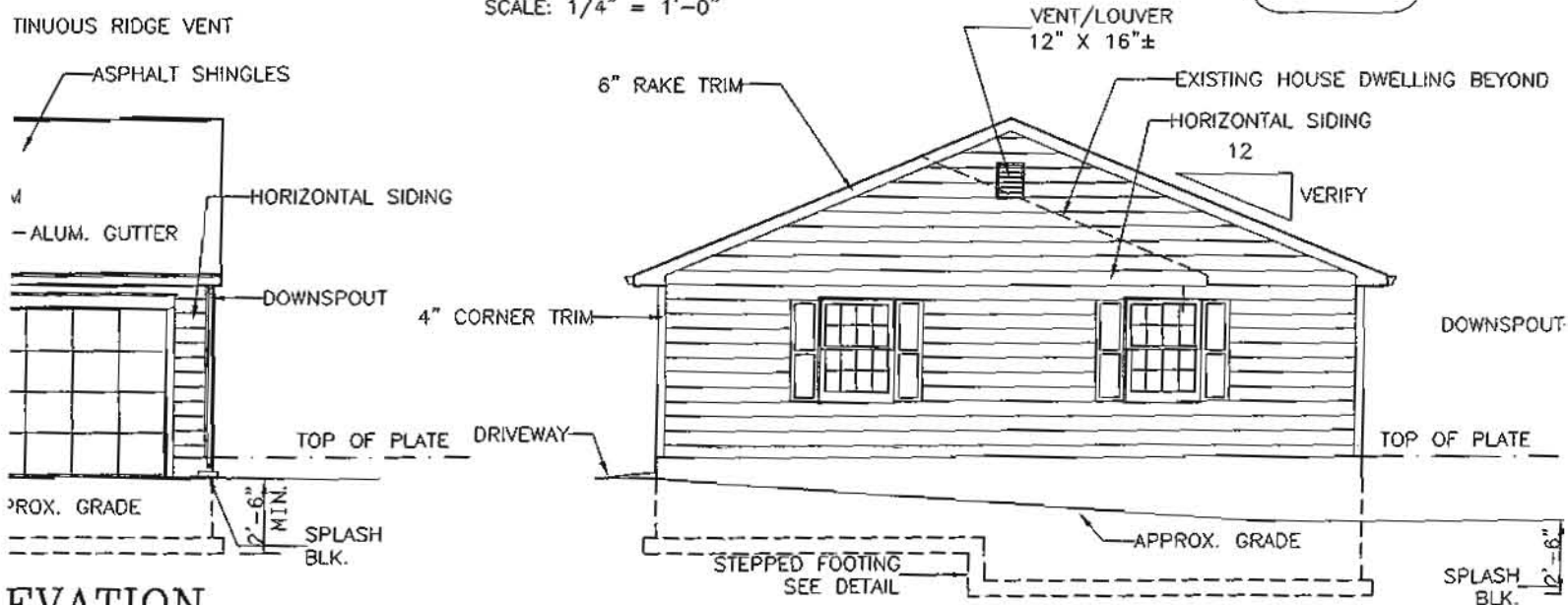
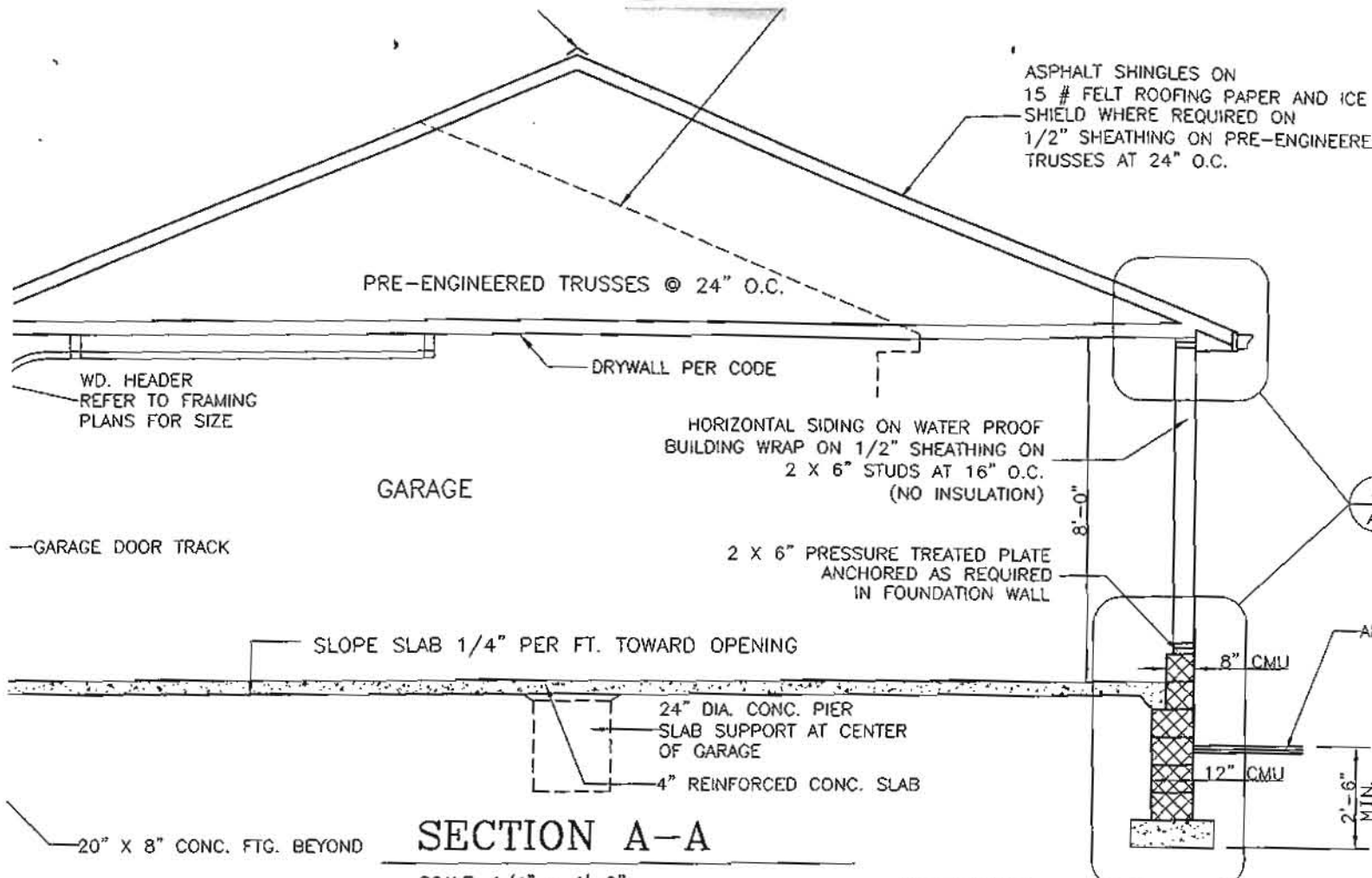
THIS LOT DOES NOT APPEAR TO LIE WITHIN THE 100 YEAR FLOOD PLAIN AS SHOWN ON THE F.E.M.A. FLOOD HAZARD MAP 24027C0130D AS REVISED NOVEMBER 6, 2013.

CERTIFICATION
 I HEREBY CERTIFY THAT I WAS IN RESPONSIBLE CHARGE OVER THE PREPARATION OF THIS LOCATION DRAWING AND THE SURVEY WORK REFLECTED IN IT, IS IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN THE CODE OF MARYLAND TITLE 9, SUBTITLE 13, CHAPTER 08, REGULATION 2-2, AND THE POSITION OF EXISTING IMPROVEMENTS AS SHOWN HEREON, ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

[Signature]
 MICHAEL D. ADCOCK, 21251
 PROFESSIONAL LAND SURVEYOR
 NO. 21257, EXPIRATION DATE 08/18/2019

Adcock & Associates · LLC
 Engineers · Surveyors · Planners
 3300 North Ridge Road, Suite 160
 Ellicott City, Maryland 21043
 Phone: 443.325.7682 Fax: 443.325.7685
 Email: mike@saaland.com

REFERENCE:
 P.B. 26, P.N. 28
 DATE:
 OCTOBER 31, 2017
 SCALE:
 1"=40'
 FILE NO.:



BRACE WALL PANEL LOADS/NOTES:

BRACING REQUIREMENTS: TABLE R602.10.3.(1)
 EXPOSURE CATEGORY B, 30 FT. MEAN ROOF HEIGHT
 10 FT EAVE TO RIDGE HEIGHT, 10 FT WALL HEIGHT
 (2) BRACED WALL LINES

ALL BRACE WALL LINES "1", "2", "A" AND "B"
 REQUIRED: 24'-0" = 4'-0"
 PROVIDED = CS-WSP (2) 4'-0" = 8'-0" FOR LINES
 "1", "2" AND "A"
 PROVIDED = CS-PF (2) 2'-0" = 4'-0" FOR LINES
 "B". SEE DETAIL 1

WALL BRACING PANEL NAILING PATTERN:
 CS-WSP LOCATIONS SHALL HAVE 7/16" OSB
 WOOD SHEATHING NAILED TO STUDS
 W/ 8d NAILS AT 6" O.C. AT EDGES
 AND 12" O.C. AT INTERMEDIATE SUPPORTS

CODE WITH LOCAL AMENDMENTS (NFPS 70)
AND LOCAL AMENDMENTS

PLUMBING CODE ILLUSTRATED
CODE (NFPA 54)
AMENDMENTS

THICKNESS)

STUD.
1) KING AT

(2) KING STUDS.

SHIELD

SPACES AT 24" O.C.

ON
ALLEYS

DRIP EDGE FLASHING

CONTINUOUS ALUM. OGEE GUTTER
ON 6" FASCIA TRIM BOARD (PVC)
ON 2 X 4" ROUGH FASCIA BOARD

BEAMS:
ALL BEAMS BY: GEORGIA PACIFIC

P.T. = PRESURE TREATED WOOD.

PROVIDE METAL JOIST/BREAM HANGERS
FOR ALL FLUSH BEAM CONDITIONS
DESIGN FOR MAX. APPLIED LOADS

BEARING WALLS TO HAVE
BLOCKING AT MID
POINTS VERTICALLY

DESIGN LOADS:
FLOOR: CONC. SLAB
ROOF:
LL=30 psf
DL=20 psf

REMOVE EXISTING
WINDOW UNIT
AND LOWER PART OF
STUD WALL FOR
PASSAGE TO NEW GARAGE

SLOPE SLAB 1/4" PER FT. TOWARD OPENING

PRE-ENGINEERED TRUSSESI AT 24" O.C.

4'-0"
CS-WSP
BWP

4'-0"
CS-WSP
BWP

4'-0"
CS-WSP
BWP

2'-6"
CS-PF
BWP

2'-0"
CS-PF
BWP

2 X 6" STUD WALLS ON REINFORCED
8" CMU ON 12" CMU (BELOW SLAB)
ON 24" X 8" CONC. FTG.

(3) 2 x 10's
header

2852

ATTIC
HATCH
ABOVE

2 X 6" STUD WALLS ON
8" CMU ON 20" X 8" CONC. FTG.

GARAGE

CONC. SLAB

4" CONC. SLAB W/
6" X 6" # 10/10 W.W.M.
ON 4" GRAVEL FILL

2852

(3) 2 x 10's
header

CONTINUOUS HEADER
(2) 1 3/4" X 16" LVL'S

16'-0" X 7'-0" OVERHEAD DOOR

7'-6"

14'-0"

7'-6"

29'-0"

