



# 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.: B18000631

Building Address: 1011 FAIRLANE ROAD  
 City: WOODBINE State: MD Zip Code: 21797  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: FAIRLANE FARM  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 15  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 59,445

Existing Use: SFD  
 Proposed Use: SFD W/PROPANE TANK  
 Estimated Construction Cost: \$ 4,000  
 Description of Work: INSTALL 1000 GAL UNDERGROUND PROPANE TANK

Occupant/Tenant Name: OWNER  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: NVR INC  
 Address: 9720 PATUXRNT WOODS DRIVE  
 City: COLUMBIA State: MD Zip Code: 21046  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: MICHELLE CLANCY  
 Address: PO BOX 310  
 City: PERRY HALL State: MD Zip Code: 21128  
 Phone: 443-610-7514 Fax: \_\_\_\_\_  
 Email: MICHELLE@APPLIEDANDAPPROVED.COM

Contractor Company: TECH AIR  
 Contact Person: DENNIS FEAGA  
 Address: 1560 A-D CATON CENTER DRIVE  
 City: BALTIMORE State: MD Zip Code: 21227  
 License No.: 81215  
 Phone: 410-984-5681 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Engineer/Architect Company: CONTRACTOR  
 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 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of obstruction (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 checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	RECEIVED
Electric: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	FEB 26 2018
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Water Supply	LICENSSES & PERMITS DIVISION
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" 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 THERE TO; (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:   
 MICHELLE@APPLIEDANDAPPROVED.COM  
 Email Address  
 PERMITS  
 Title/Company

MICHELLE CLANCY  
 Print Name  
 Date: 2/20/18

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>3/8/18</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	\$ <u>110.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check #	<u>6330</u>

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

154 S.F.	458 S.F.	633 S.F.
154 S.F.	562 S.F.	658 S.F.
		167 S.F.

DOWNSPOUT DRAINAGE AREAS  
SCALE: 1"=30'



**STORMWATER MANAGEMENT NOTES:**  
STORMWATER MANAGEMENT FOR LOT 15 IS BEING PROVIDED BY A COMBINATION OF NON-ROOFTOP DISCONNECTION (N-2) FOR THE DRIVEWAY AREA AND AREAS OF THE PROPOSED HOUSE WILL BE TREATED WITH FOUR (4) DRYWELLS.

NOTE: FOR LOT 15, NO GRAVITY SEWER SERVICE FOR THE BASEMENT

10000 LBS  
Tank  
NOTE: NO GRAVITY SEWER SERVICE FOR LOT 15

Part of Available Preservation Parcel 'A'  
80' to well  
Approved for UP  
B18000631  
RMA 3/18/18

**OWNER/DEVELOPER**  
NV HOMES  
9720 PATUDENT WOODS DRIVE  
COLUMBIA, MD 21046  
410-379-2600

NOTE: THE EXISTING WELL SHOWN ON THIS PLAN, HD-15-0350, HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.

**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CORPORATE SERVICE OFFICE PARK - 19272 BALDWIN NATIONAL PARK  
SUITE 101, WAREHOUSING 21042  
(410) 461-2266

PLAN  
SCALE: 1"=40'

PERMIT SITE PLAN  
LOT 15  
1011 FAIRLANE ROAD  
FAIRLANE FARMS  
PHASE ONE

ZONED: RC-DEO  
TAX MAP NO.: B GRID NO.: 2 PARCEL NO.: 8  
5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
SCALE: 1"=30' DATE: OCT. 18, 2017  
SHEET 1 OF 1

\*APPROVED FOR CONSTRUCTION\*



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: \_\_\_\_\_

Permit No.: B17003802

Building Address: 1011 Fairlane Road  
City: Woodbine State: MD Zip Code: 21797  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: GP 17-81  
Census Tract: \_\_\_\_\_ Subdivision: Fairlane Farm  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 15  
Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Property Owner's Name: NVR Inc  
Address: 9720 Patuxent Woods Drive  
City: Columbia State: MD Zip Code: 21046  
Phone: 410-379-5956 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated herein)  
Applicant's Name: Decatur Building Services  
Address: PO Box 552  
City: Woodbine State: MD Zip Code: 21797  
Phone: 443-309-7792 Fax: \_\_\_\_\_  
Email: Jim@DecaturbuildingServices.com

Contractor Company: NV Homes  
Contact Person: Taylor Faris  
Address: 9720 Patuxent Woods Drive  
City: Columbia State: MD Zip Code: 21046  
License No.: 56  
Phone: 410-379-5956 Fax: \_\_\_\_\_  
Email: Tfaris@NVRINC.com

Engineer/Architect Company: \_\_\_\_\_  
Responsible Design Prof.: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Existing Use: Vacant lot  
Proposed Use: Single family house  
Estimated Construction Cost: \$ 230,000  
Description of Work: New 2 story "Marymont" with 2 car side and 1 car attached garage, finished basement (Rec rm, area # 2, Bath room)

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

RECEIVED

OCT 23 2017

LICENSES & PERMITS DIVISION

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 <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"/> Craw Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>4</u>	
<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	
<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Heating System</u>	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<u>Sprinkler System:</u>	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

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Jim Kerwin  
Applicant's Signature  
Jim@DecaturbuildingServices.com  
Email Address  
AGENT NV Homes  
Title/Company

Jim Kerwin  
Print Name  
10/23/2017  
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>[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	#

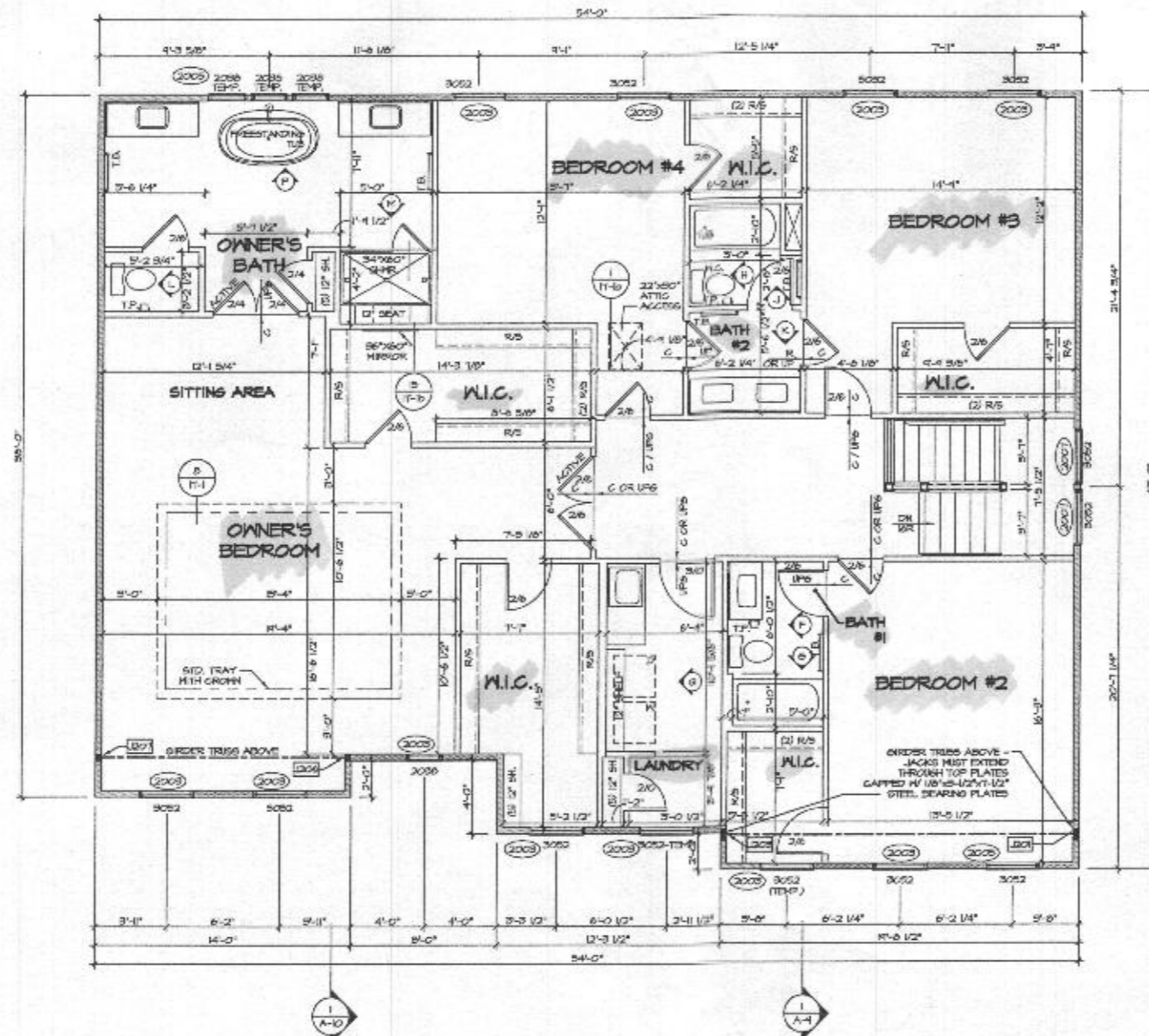
Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

MTHU - Yes









1 SECOND FLOOR PLAN  
A-8 SCALE 1/4" = 1'-0"

**LEGEND**

- BEARING WALL
- NON BEARING WALL
- INDICATED BEARINGS FROM PORT-LOAD ABOVE
- JACKS
- BEAM-HEADER
- PAD FOOTING
- STEEL COLUMN
- PORTAL FRAME
- JOIST/TRUSS
- LVL
- ENGINEERING PANE NUMBER

SEE PG DETAILS FOR TRUSS CONNECTORS

- FLOOR PLAN NOTES**
- ALL READERS ARE (2) 2x6 W/ 2x4 WALLS OR (2) 2x6 W/ 2x6 WALLS, UNLESS OTHERWISE NOTED.
  - ALL READERS TO HAVE (1) 2x4 OR 2x6 JACK EACH END, UNLESS OTHERWISE NOTED.
  - ALL EXTERIOR WALLS TO BE 4" AND ALL INTERIOR WALLS TO BE 5 1/2" UNLESS OTHERWISE NOTED.
  - HATCHED AREAS INDICATE DROPPED CEILING. ALL DROPPED CEILING ARE 12" UNLESS OTHERWISE NOTED.
  - SEE SPACED HALL PANEL DETAIL SHEET FOR SPECIAL WALL FRAMING LOCATION AND FRAMER SIZE, IF APPLICABLE.
  - ALL WINDOWS HAVE 1'-0 1/2" HEADER HEIGHT UNLESS OTHERWISE NOTED.
  - ALL GATED OPENINGS AT 7'-1", UNLESS OTHERWISE NOTED.

**SECOND FLOOR JACK SCHEDULE**

IDENTIFIER	DESCRIPTION	OPTIONS	ENS. NUM.	REMARKS
J201	JACK - (2) 2x4 SPM	BL	3001	MUST EXTEND THROUGH TOP PLATE, GAP WITH 1/2" x 5-1/2" x 7-1/2" STEEL BEARING PLATE
J202	JACK - (2) 2x4 SPM	BL	3001	MUST EXTEND THROUGH TOP PLATE, GAP WITH 1/2" x 5-1/2" x 7-1/2" STEEL BEARING PLATE
J206	JACK - (2) 2x4 SPM	BL	3001	
J207	JACK - (2) 2x4 SPM	BL	3001	

NOTES: SEE TRUSS SCHEDULE FOR TRUSS CONNECTIONS. ALL TRUSS CONNECTIONS TO BE MADE IN ACCORDANCE WITH THE MANUFACTURER'S INSTRUCTIONS. ALL TRUSS CONNECTIONS TO BE MADE IN ACCORDANCE WITH THE MANUFACTURER'S INSTRUCTIONS. ALL TRUSS CONNECTIONS TO BE MADE IN ACCORDANCE WITH THE MANUFACTURER'S INSTRUCTIONS.



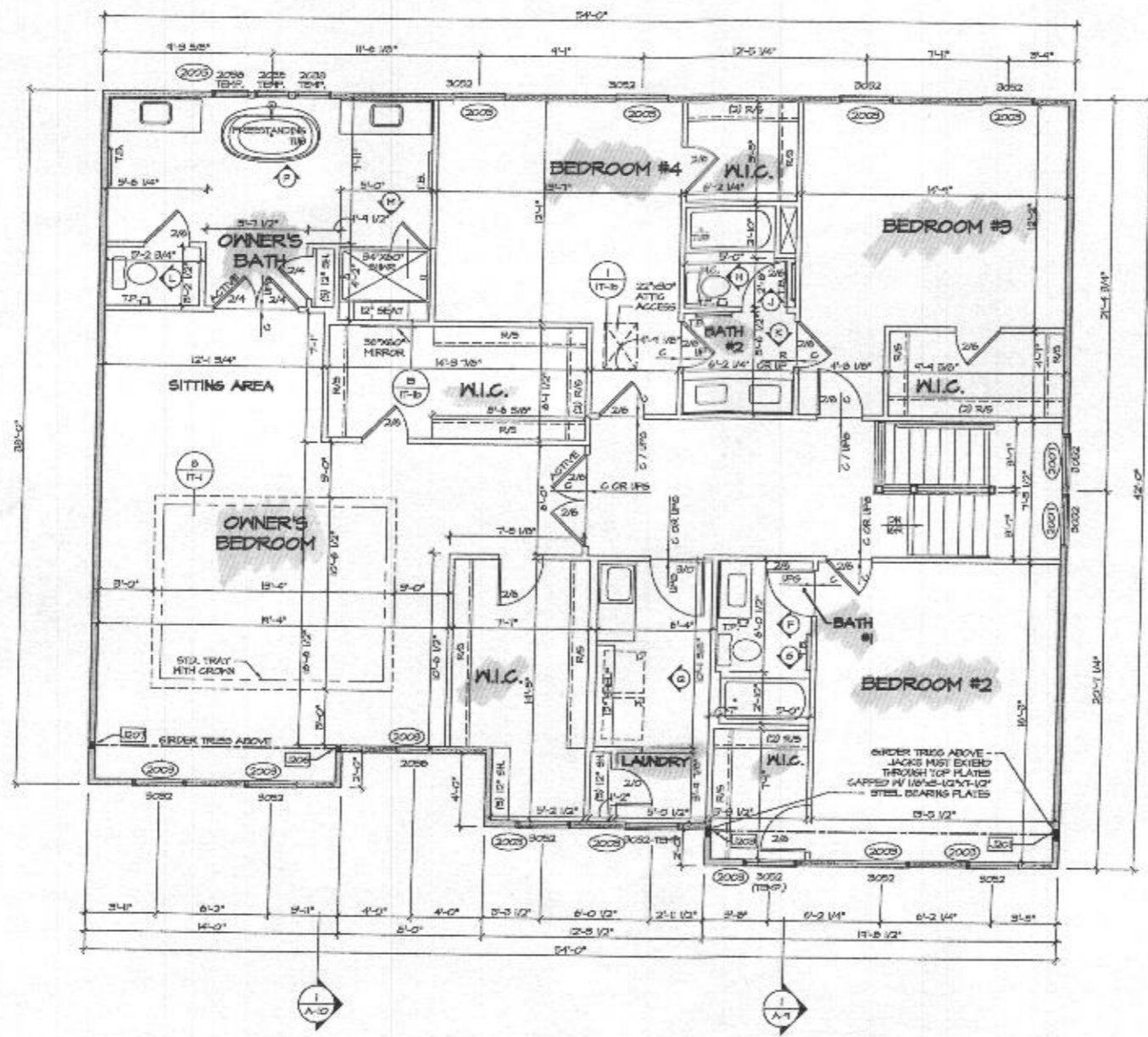
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DRAWN BY:	DATE:
OPTION:	OPTION:
MODEL: MARYMOUNT DRAWING TITLE: SECOND FLOOR PLAN OPTION DESCRIPTION:	
SHEET NO. A-8	28

DATE PLOTTED: 10/11/2006 10:11:11 AM









**LEGEND**

- BEARING WALL
- NON BEARING WALL
- INDICATES BEARINGS FROM POINT-LOAD ABOVE
- JACKS
- BEAM/HEADER
- RAFT FOOTING
- STEEL COLUMN
- PORTAL FRAME
- JOIST/TRUSS
- LVL
- ENGINEERING PAGE NUMBER

SEE FC DETAILS FOR FRAMING CONNECTORS

- FLOOR PLAN NOTES**
- ALL HEADERS ARE (3) 2x6 w/ 2x4 HALLS OR (3) 2x6 w/ 2x4 HALLS, UNLESS OTHERWISE NOTED.
  - ALL HEADERS TO HAVE (2) 2x4 OR 2x6 JACK EACH END, UNLESS OTHERWISE NOTED.
  - ALL EXTERIOR WALLS TO BE 4" AND ALL INTERIOR WALLS TO BE 8 1/2", UNLESS OTHERWISE NOTED.
  - HATCHED AREAS INDICATE DROPPED CEILING. ALL DROPPED CEILING ARE 12" UNLESS OTHERWISE NOTED. SEE HATCHED WALL PANEL DETAIL SHEET FOR SPECIAL WALL FRAMING LOCATIONS AND HEADER SIZES, IF APPLICABLE.
  - ALL ROOMS HAVE 1'-0" 1/2" HEADER HEIGHT UNLESS OTHERWISE NOTED.
  - ALL GATED OPENINGS AT 7'-0", UNLESS OTHERWISE NOTED.

**SECOND FLOOR JACK SCHEDULE**

IDENTIFIER	DESCRIPTION	OPTIONS	ENG. NPL	REMARKS
J001	JACK - (3) 2x4 SPK	ELL	2001	MUST EXTEND THROUGH TOP PLATE, CAP WITH 1/2" x 3-1/2" x 7-1/2" STEEL BEARING PLATE
J002	JACK - (3) 2x4 SPK	ELL	2001	MUST EXTEND THROUGH TOP PLATE, CAP WITH 1/2" x 3-1/2" x 7-1/2" STEEL BEARING PLATE
J003	JACK - (3) 2x4 SPK	ELL	2001	BEARING PLATE
J007	JACK - (3) 2x4 SPK	ELL	2001	

**1 SECOND FLOOR PLAN**  
 A-B  
 SCALE: 1/4" = 1'-0"

REL. USE, REVISIONS, ETC. APPROXIMATE TO SURVEY AND TO BE CORRECTED TO MATCH SURVEY. ALL DIMENSIONS TO FACE UNLESS OTHERWISE NOTED. ALL DIMENSIONS TO FACE UNLESS OTHERWISE NOTED. ALL DIMENSIONS TO FACE UNLESS OTHERWISE NOTED. ALL DIMENSIONS TO FACE UNLESS OTHERWISE NOTED.



PROJECT NO.	DATE
VERSION	DATE
REVISION	DATE
DESCRIPTION	DATE

**MARYMOUNT**  
 SECOND FLOOR PLAN

**A-B**

28