



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. **B1700 3579**

Building Address: _____
 City: _____ State: _____ Zip Code: _____
 Suite/Apt. # _____ SDP/WP/BA #: **F-13-0321**
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: **R2-1710** Map Coordinates: _____ Lot Size: _____

Existing Use: _____
 Proposed Use: _____
 Estimated Construction Cost: \$ _____
 Description of Work: _____
 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: _____
 City: _____ State: _____ Zip Code: _____
 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: _____
 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:	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	
Water Supply	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input 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 type="checkbox"/> No	
Grading Permit Number:	61700-291
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 _____

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		10-23-17 Bernard

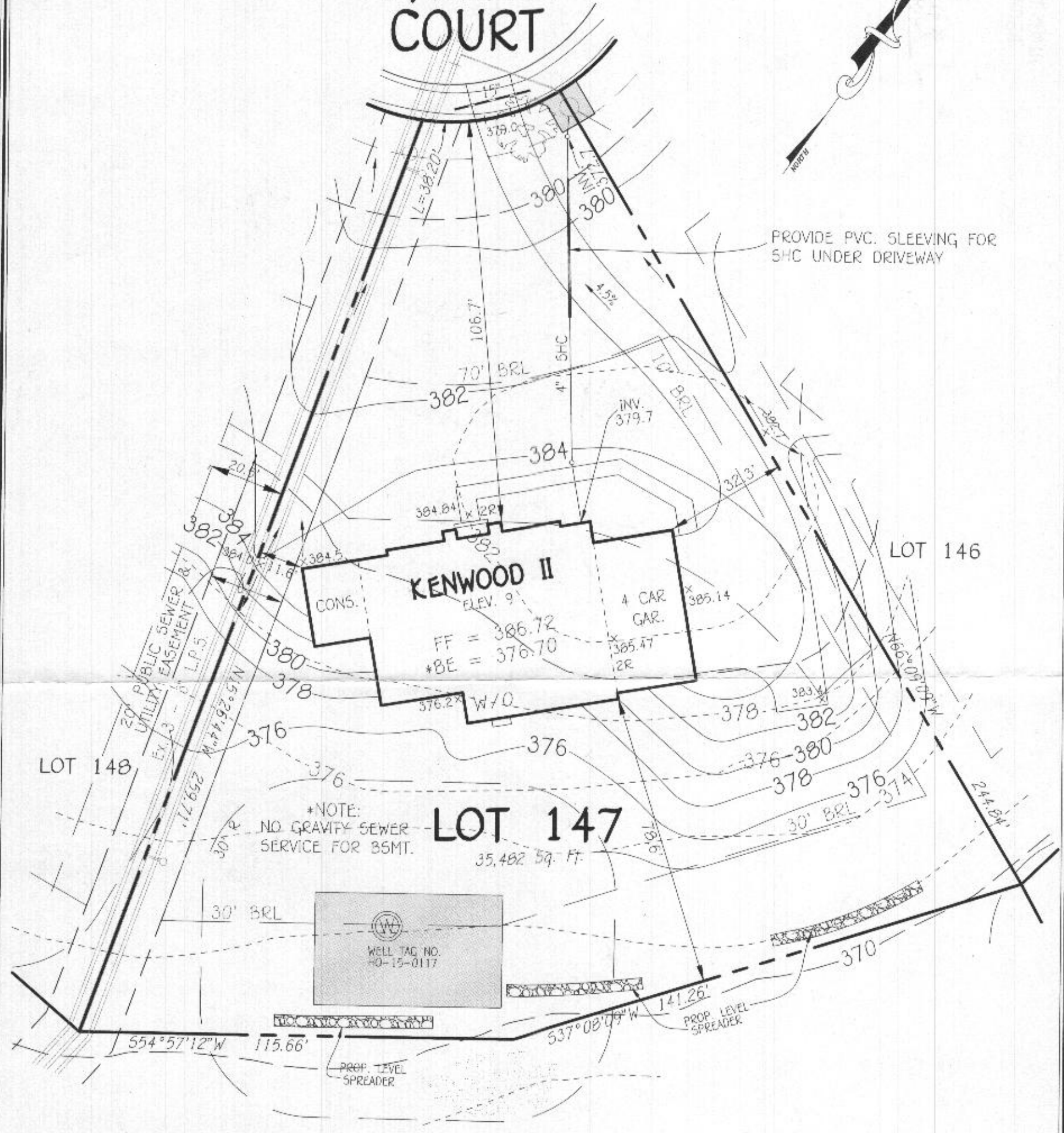
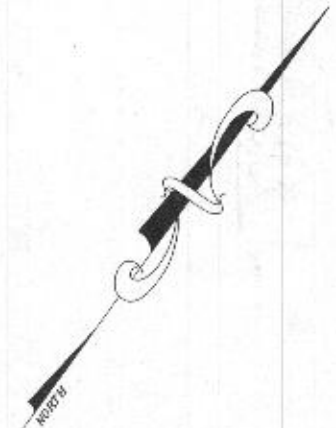
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

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

CRAPE MYRTLE COURT



PROVIDE PVC. SLEEVING FOR SHC UNDER DRIVEWAY

*NOTE:
NO GRAVITY SEWER SERVICE FOR BSMT.

LOT 147
35,482 SQ. FT.



PLAN

SCALE: 1" = 30'

APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____
APP. SAN DBernard DATE: 10-25-17
DESC. OF WORK: SFD

*Approve for 4 Bedrooms
Unfinished Basement*

PERMIT SITE PLAN
LOT 147

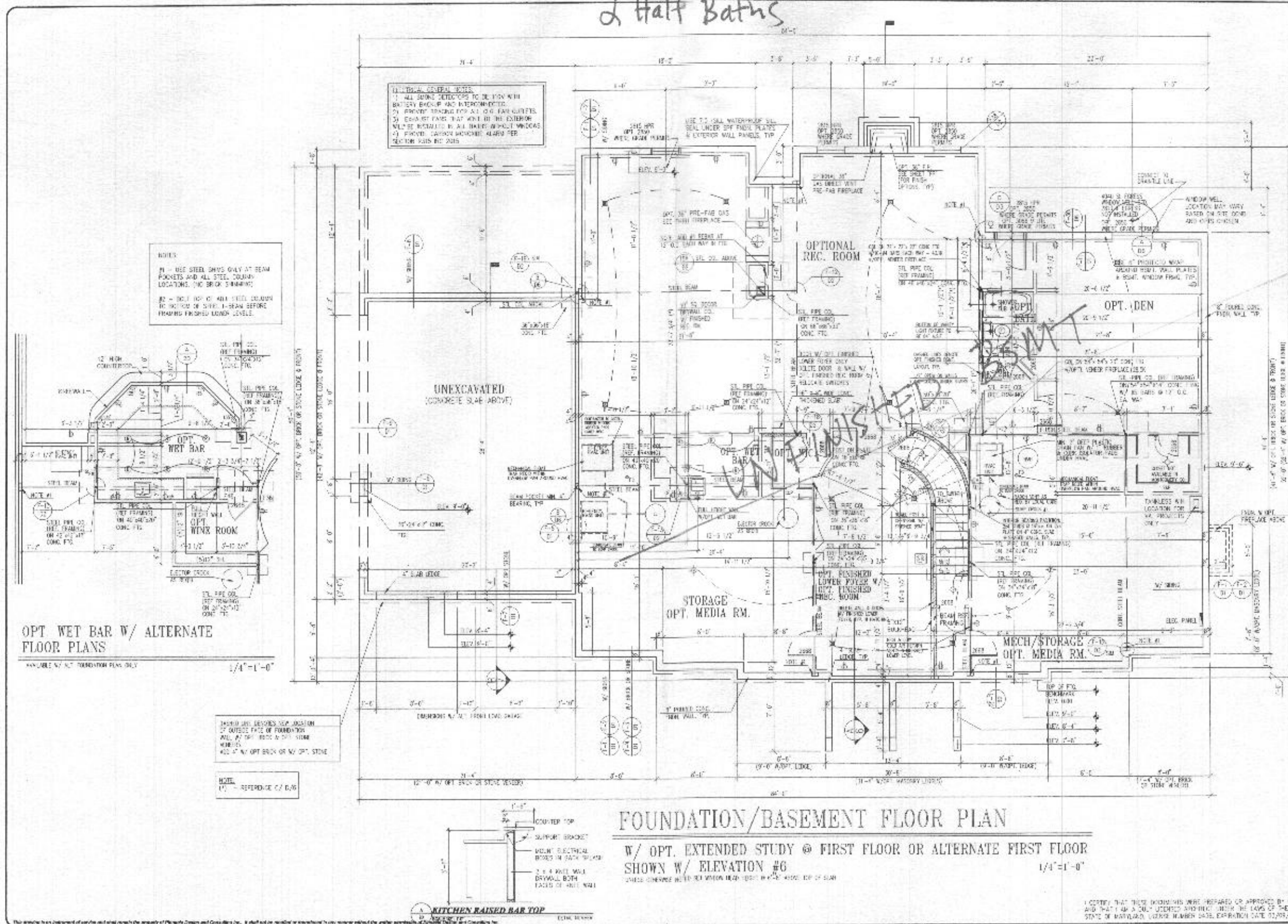
5051 CRAPE MYRTLE COURT
WALNUT CREEK

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

ZONED: RC-DEO
TAX MAP NO.: 2B PARCEL NO. 49 GRID NO.: 17 & 18
FIFTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1" = 30' DATE: SEPT. 14, 2017

Walnut Creek - lot 147
5051 Grape Myrtle Court

4 Bedrooms
4 Full Baths
2 Half Baths




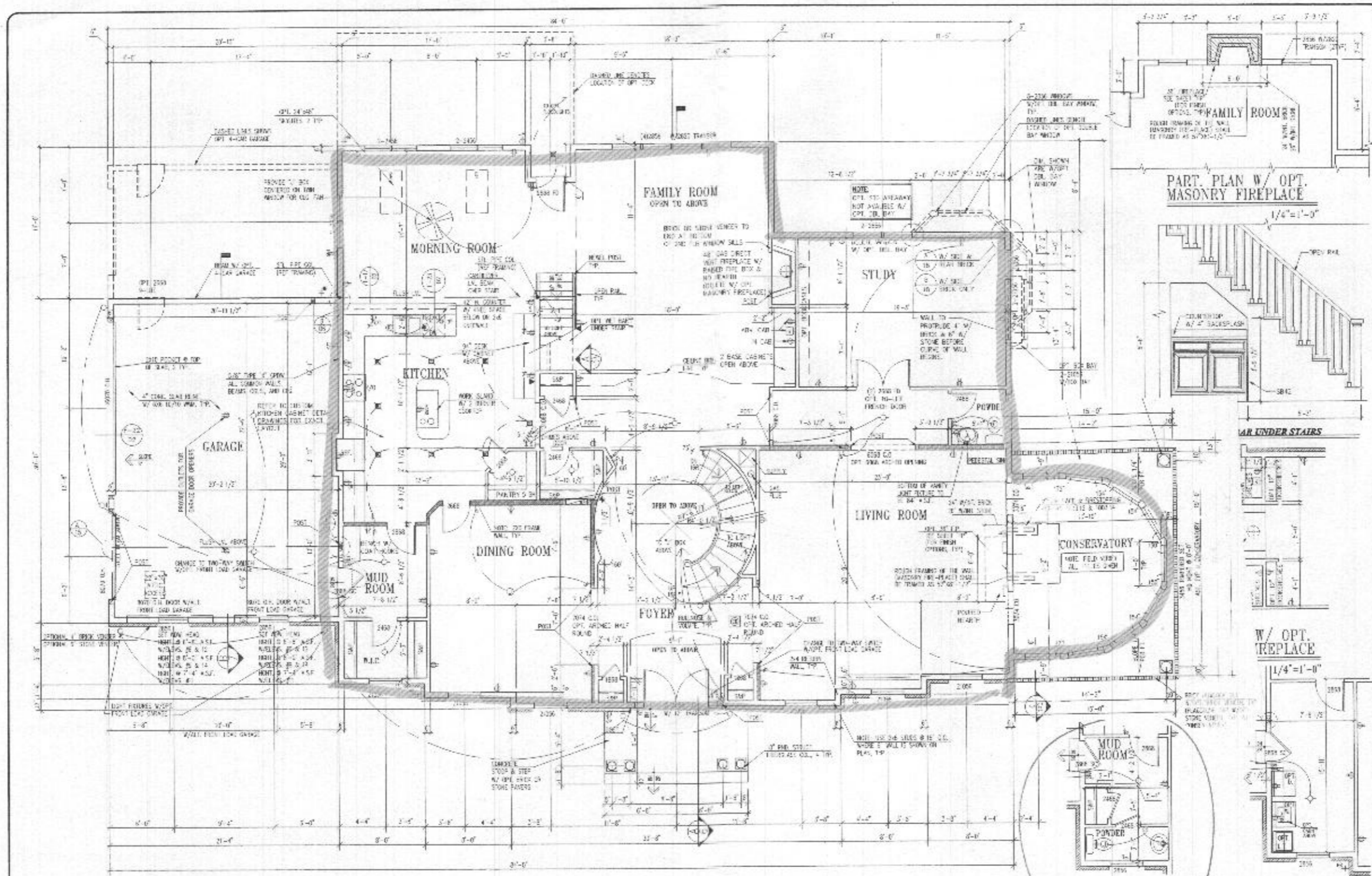
Pinnacle Design & Consulting Inc.
ARCHITECTURE • PLANNING • CONSULTING • MARKET ANALYSIS • HOUSING
11111 Lakeside Blvd. • Suite 101 • Littleton, Virginia 22079
Tel: 703.311.2100 • Web: www.pinnacleinc.com

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

DATE	DESCRIPTION
11/20/2011	ISSUED FOR PERMIT
11/20/2011	ISSUED FOR PERMIT
11/20/2011	ISSUED FOR PERMIT
11/20/2011	ISSUED FOR PERMIT
11/20/2011	ISSUED FOR PERMIT
11/20/2011	ISSUED FOR PERMIT
11/20/2011	ISSUED FOR PERMIT
11/20/2011	ISSUED FOR PERMIT
11/20/2011	ISSUED FOR PERMIT
11/20/2011	ISSUED FOR PERMIT

20

 = Finished portions of house



ALT. LOWER FLOOR PLAN

SHOWN W/ ELEVATION #6

UNLESS OTHERWISE NOTED HEIGHT HEAD HEIGHT SHALL BE 8'-0" UNLESS OTHERWISE NOTED

1/4" = 1'-0"

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

NOTE: 1) MARKING MADE IN WALL ALWAYS BE ON THE LEFT, MARKING MADE IN CEILING ALWAYS BE ON THE RIGHT. EVEN IN THE SECTION PLAN.

PART. PLAN W/ OPT. 1ST FLR POWDER @ MUD ROOM

1/4" = 1'-0"

PART. PLAN W/ OPT. 1ST FLR LAUNDRY

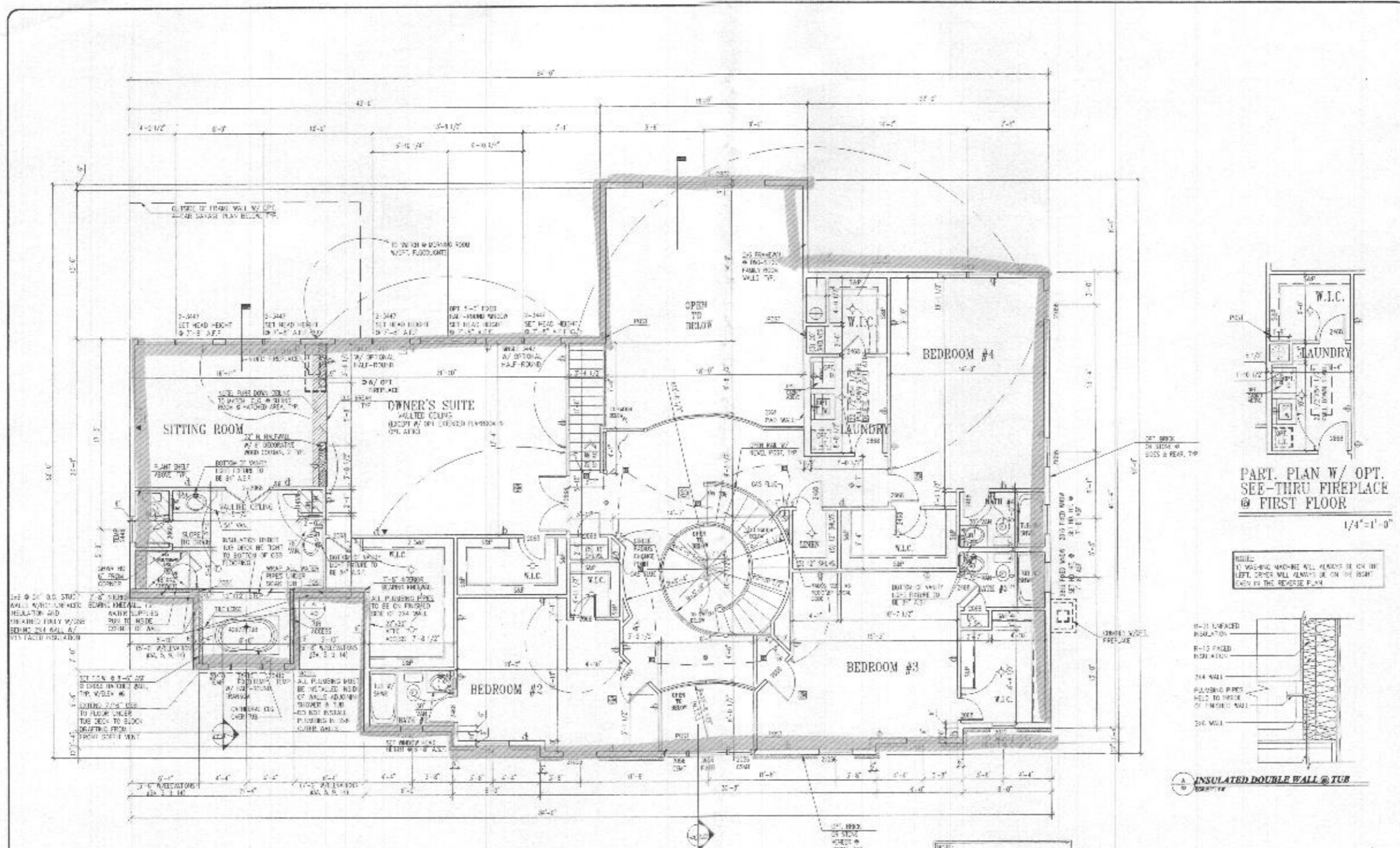
1/4" = 1'-0"

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 0002, EXPIRATION DATE 12/31/2021.

Pinnacle Design & Consulting Inc.
 ARCHITECTS & CONSULTANTS
 11120 Greenway Blvd., Suite 400, Annapolis, Virginia 20704
 Tel: 301.313.1400 • Fax: 301.313.1401 • Web Site: www.pinnacle-design.com

ALT. ALTERNATE LOWER FLOOR PLAN
 OPT. ALTERNATE LOWER FLOOR PLAN / KENWOOD II
 CRAFTMARK HOMES

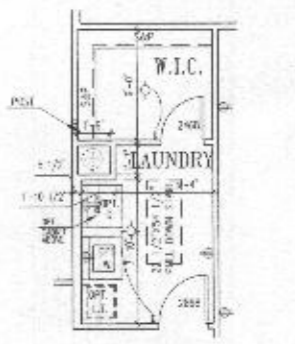
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08/19/20	RUSSELL	ISSUED FOR PERMITS
08/19/20	RUSSELL	ISSUED FOR PERMITS
08/19/20	RUSSELL	ISSUED FOR PERMITS
08/19/20	RUSSELL	ISSUED FOR PERMITS
08/19/20	RUSSELL	ISSUED FOR PERMITS
08/19/20	RUSSELL	ISSUED FOR PERMITS
08/19/20	RUSSELL	ISSUED FOR PERMITS
08/19/20	RUSSELL	ISSUED FOR PERMITS
08/19/20	RUSSELL	ISSUED FOR PERMITS



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

SHOWN W/ ELEVATION #6

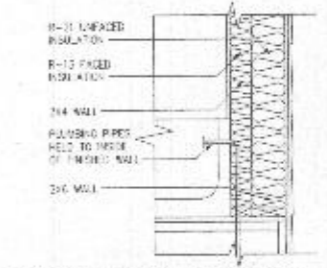
1/4" = 1'-0"



PART. PLAN W/ OPT. SEE-THRU FIREPLACE @ FIRST FLOOR

1/4" = 1'-0"

NOTE: ALL WINDOW OPENING WILL ALWAYS BE ON THE LEFT, OTHER WILL ALWAYS BE ON THE RIGHT EXCEPT IN THE REVERSE PLAN.



INSULATED DOUBLE WALL @ TUB

NOTE: WINDOWS WITH THE OPERABLE OPENING IS LOCATED MORE THAN 2' ABOVE THE GRADE OR SURFACE BELOW SHALL HAVE THE LOWER PART OF THE CLEAR OPENING A MINIMUM OF 24" FOR PUP LOGS, COME WITH THE FINISHED FLOOR UNLESS FINISHED WITH AN APPROVED OPERING LIMITING OR FALL PREVENTION DEVICE.

ELECTRICAL SYMBOLS: 1) ALL THREE ELECTRICAL TO BE TYPED WITH BATTERY BACKUP AND RECONNECTED. 2) PROVIDE BRACKETS FOR ALL GFCI, FAULT OUTLETS. 3) LOCATIONS MARKED WITH 'X' TO THE EXTERIOR ALL TO BE INSTALLED IN ALL BATHS WITHOUT WINDOWS. 4) PROVIDE CARBON MONOXIDE ALARM PER SECTION 1205.02.02

PINNACLE DESIGN & CONSULTING, INC.
ARCHITECTURE • PLANNING • CONSULTING • MARKET ANALYSIS • RECORDS
11741 PLEASANT HILL ROAD, SUITE 403 • CLARK, MARYLAND 21031
PH: 410-326-1000 • FAX: 410-326-1001

ALT. UPPER FLOOR W/ ALT. FLOOR PLAN
CRAFTMARK HOMES / KENWOOD II

NO.	REV.	DATE	DESCRIPTION
001	01	08/20/11	ISSUED FOR PERMITS
002	01	08/20/11	ISSUED FOR PERMITS
003	01	08/20/11	ISSUED FOR PERMITS
004	01	08/20/11	ISSUED FOR PERMITS
005	01	08/20/11	ISSUED FOR PERMITS
006	01	08/20/11	ISSUED FOR PERMITS
007	01	08/20/11	ISSUED FOR PERMITS
008	01	08/20/11	ISSUED FOR PERMITS
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010	01	08/20/11	ISSUED FOR PERMITS

4D

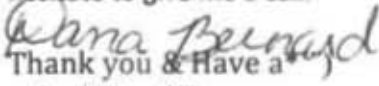
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Bernard, Dana

From: Bernard, Dana
Sent: Tuesday, October 24, 2017 2:37 PM
To: 'CARRRACHE@GMAIL.COM'
Cc: 'DSCHOEN@CRAFTMARKHOMES.COM'
Subject: Building Permit B17003579

David of CraftMark and Rachel Carr of Rapid Permitting Service ,

I am approving your building permit for a 4 bedroom house with an unfinished basement. As the developer I am letting you know that you must inform the potential buyer of the bedroom restrictions on this house. You have a potential for 6 bedrooms in this house , however, with the shared system you only qualify for 5 bedrooms. If the potential buyer should finish the basement with only 1 additional bedroom they would have to upgrade the septic system. And if they submitted an application for 6 bedrooms it would be denied. This memo will be forward to the file attached to this address 5051 Caper Myrtle Court. Building permit B17003579. If you have any questions don't hesitate to give me a call.

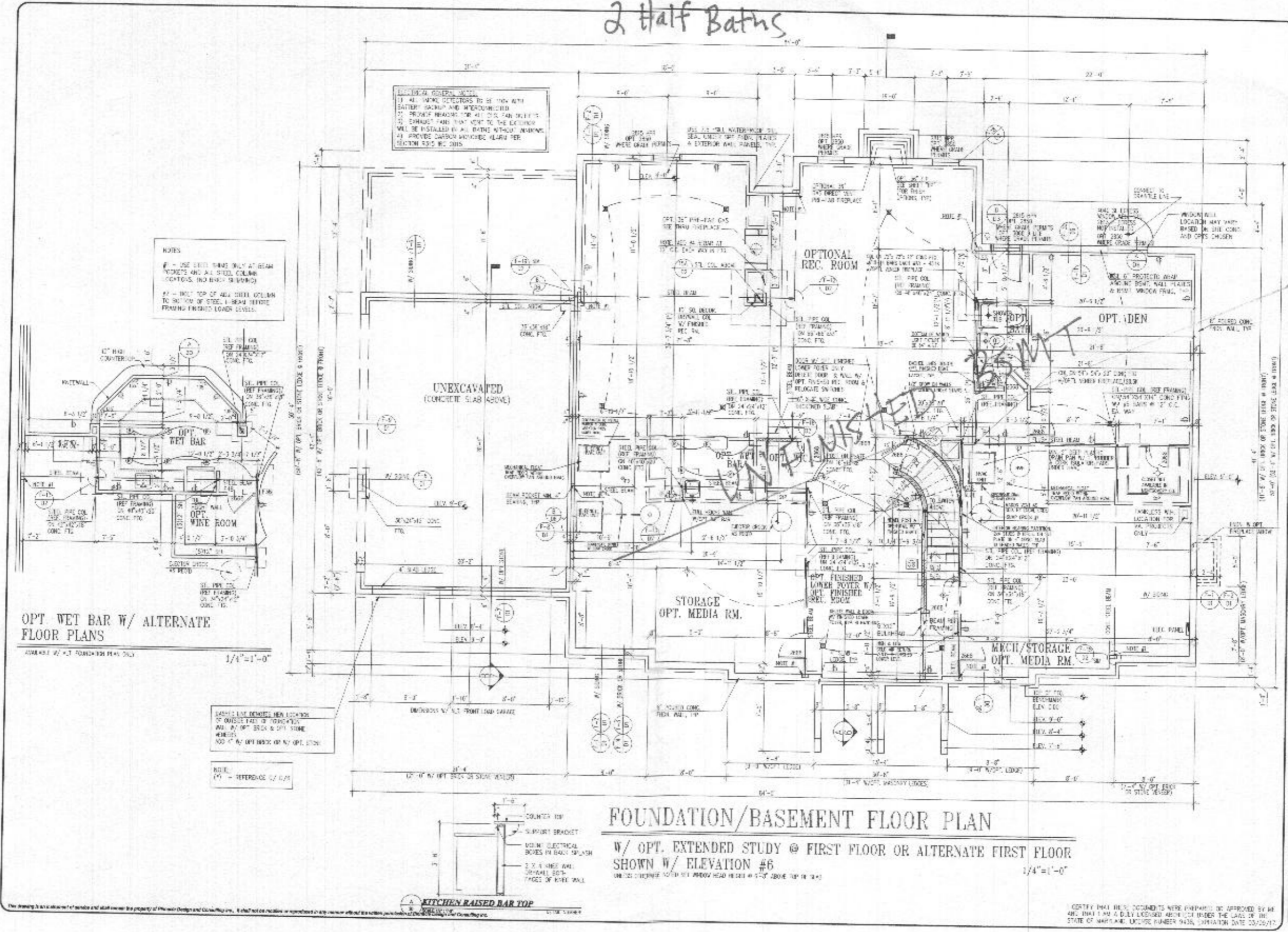

Thank you & Have a


(. (. * Wonderful Day !

Dana Bernard, R.E.H.S./L.E.H.S.
Environmental Specialist II
Bureau of Environmental Health
Well and Septic Program
Phone (410) 313-2775
E-mail: DBernard@howardcountymd.gov

Walnut Creek - lot 147
5051 Grape Myrtle Court

4 Bedrooms
4 Full Baths
2 Half Baths



PINNACLE DESIGN & CONSULTING INC.
11515 PINEBROOK DRIVE, SUITE 100, FARMERS BRANCH, TX 75448
714.261.1111


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

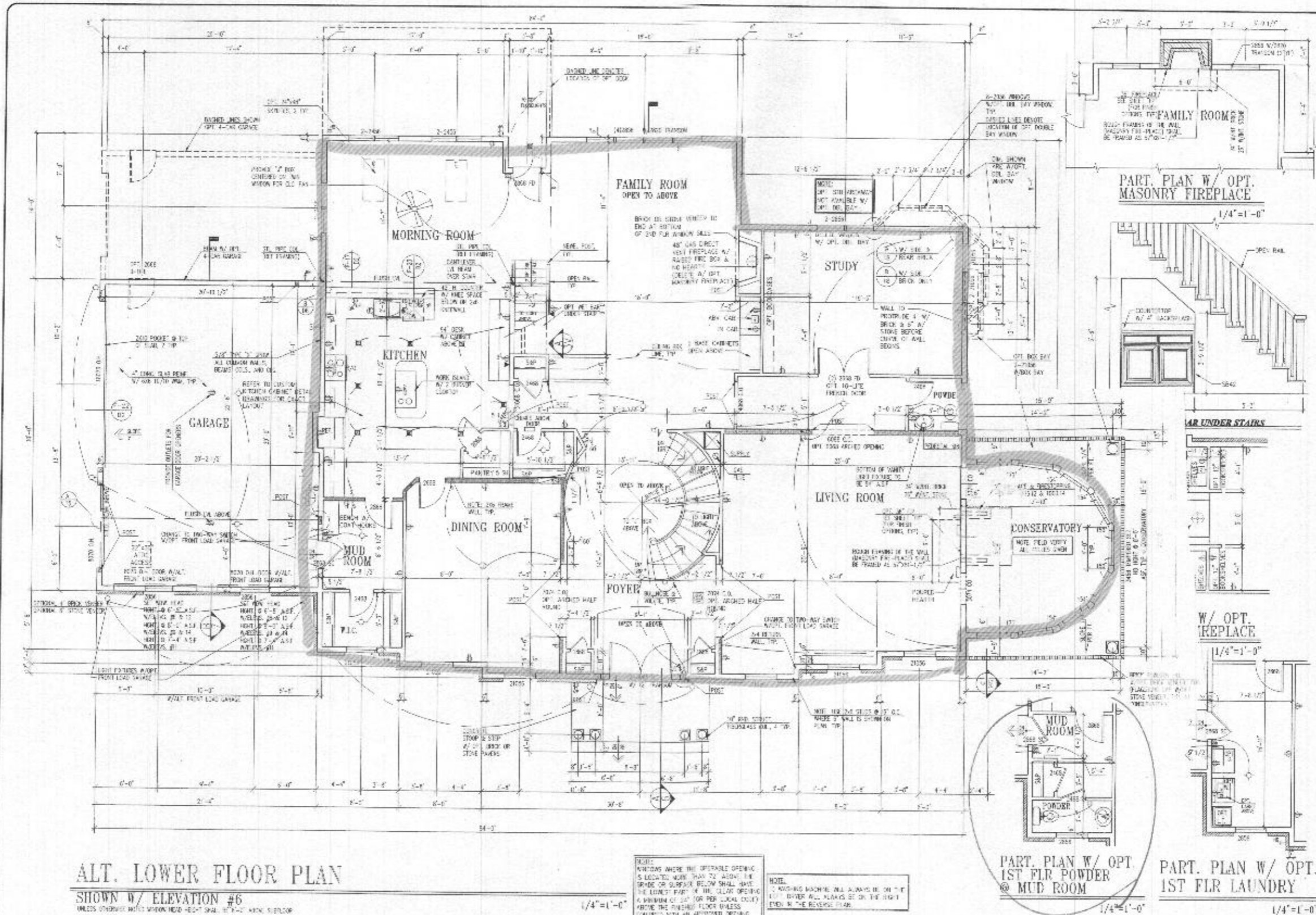
NO.	DATE	DESCRIPTION
1	10/23/17	ISSUED FOR PERMIT
2	10/23/17	ISSUED FOR PERMIT
3	10/23/17	ISSUED FOR PERMIT
4	10/23/17	ISSUED FOR PERMIT
5	10/23/17	ISSUED FOR PERMIT
6	10/23/17	ISSUED FOR PERMIT
7	10/23/17	ISSUED FOR PERMIT
8	10/23/17	ISSUED FOR PERMIT
9	10/23/17	ISSUED FOR PERMIT
10	10/23/17	ISSUED FOR PERMIT

2D

Floor Plans for 4 PR. Possible 5 or 6 Approving (4) 10/23/17

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 TEXAS, LICENSE NUMBER 9436, EXPIRATION DATE 03/31/21

 = Finished portions of house



ALT. LOWER FLOOR PLAN
 SHOWN W/ ELEVATION #6
 UNLESS OTHERWISE NOTED, WORK SHALL BE AS SHOWN ON SHEET #6

1/4"=1'-0"

NOTE:
 WINDOWS WHERE THE OPERABLE OPENING IS LOCATED MORE THAN 72" ABOVE THE FINISH OR SURFACE BELOW SHALL HAVE THE LOWEST PART OF THE CLOSING OPERING A MINIMUM OF 36" (OR PER LOCAL CODE) ABOVE THE FINISHED FLOOR UNLESS CALLED OUT WITH AN APPROVED OPENING CALLING OUT THE PRECISE OPENING.

NOTE:
 WASHING MACHINE SHALL ALWAYS BE ON THE LEFT DOOR AND ALWAYS BE ON THE RIGHT END IN THE REVERSE PLAN.

PART. PLAN W/ OPT. 1ST FLR POWDER @ MUD ROOM
 1/4"=1'-0"

PART. PLAN W/ OPT. 1ST FLR LAUNDRY
 1/4"=1'-0"

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 1100 W. 10TH AVE. SUITE 200 • DENVER, COLORADO 80202
 TEL: 303.733.1100 • FAX: 303.733.1101

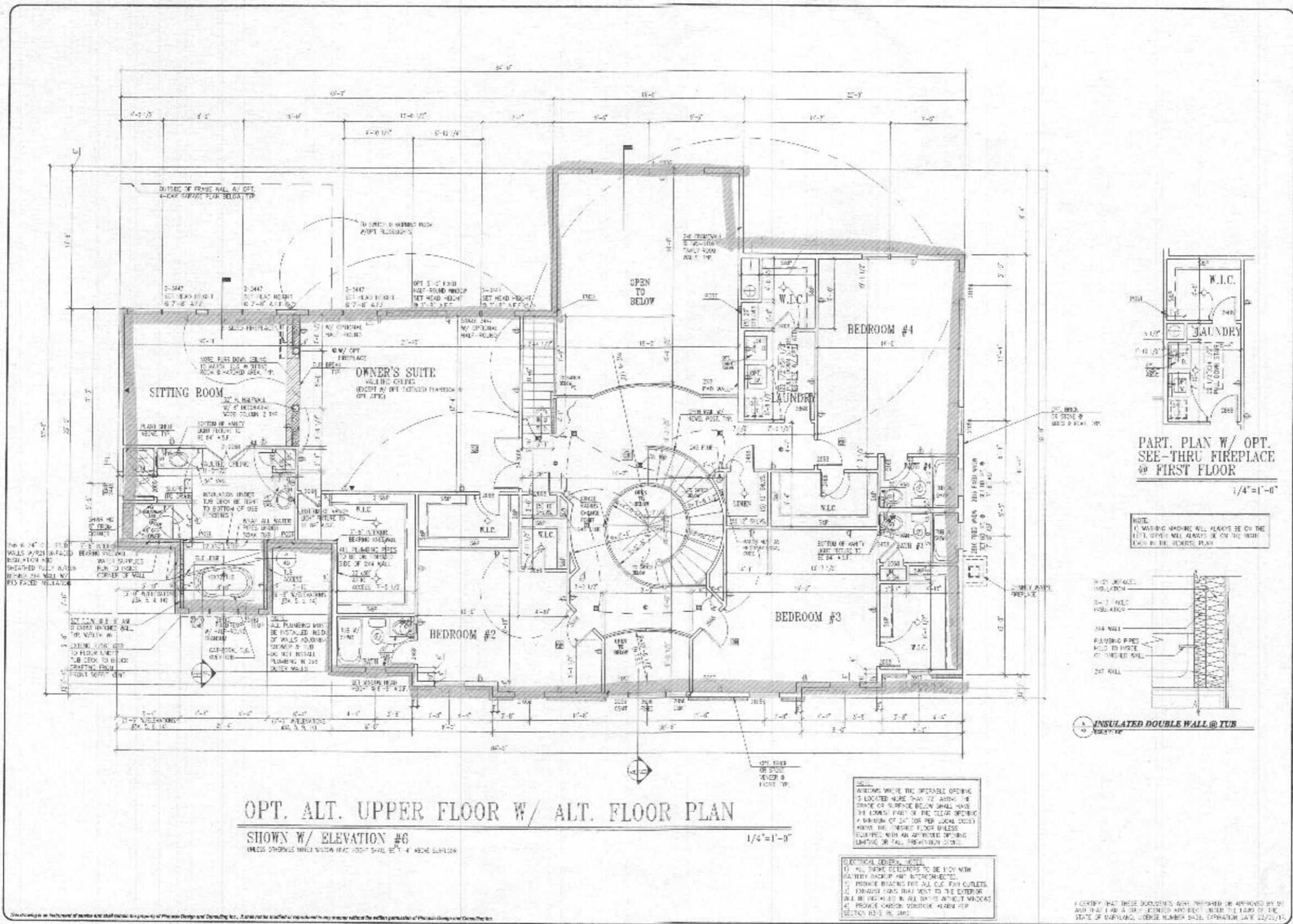
OPT. ALTERNATE LOWER FLOOR PLAN
 CRAFTMARK HOMES / KENWOOD II

NO.	DATE	DESCRIPTION
001	10/02/02	ISSUED FOR PERMITS
002	10/02/02	ISSUED FOR PERMITS
003	10/02/02	ISSUED FOR PERMITS
004	10/02/02	ISSUED FOR PERMITS
005	10/02/02	ISSUED FOR PERMITS
006	10/02/02	ISSUED FOR PERMITS
007	10/02/02	ISSUED FOR PERMITS
008	10/02/02	ISSUED FOR PERMITS
009	10/02/02	ISSUED FOR PERMITS
010	10/02/02	ISSUED FOR PERMITS

34

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I HEREBY STATE THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME AND THAT I AM A DULY LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF COLORADO LICENSE NUMBER 9922, EXPIRATION DATE 03/31/11



PINNACLE DESIGN & CONSULTING INC.
 ARCHITECTURAL SERVICES • INTERIOR DESIGN • ENERGY ANALYSIS • SUSTAINABLE DESIGN
 11111 W. 10th Ave. • Suite 402 • Tulsa, Oklahoma 74107
 P: 918.259.1881 • M: 918.259.1882 • www.pinnacleinc.com

ALT. UPPER FLOOR W/ ALT. FLOOR PLAN
 CRAFTMARK HOMES / KENWOOD II

NO.	DATE	DESCRIPTION
1	11/11/2021	ISSUED FOR PERMITS
2	11/11/2021	ISSUED FOR PERMITS
3	11/11/2021	ISSUED FOR PERMITS
4	11/11/2021	ISSUED FOR PERMITS
5	11/11/2021	ISSUED FOR PERMITS
6	11/11/2021	ISSUED FOR PERMITS
7	11/11/2021	ISSUED FOR PERMITS
8	11/11/2021	ISSUED FOR PERMITS
9	11/11/2021	ISSUED FOR PERMITS
10	11/11/2021	ISSUED FOR PERMITS

4D

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 OKLAHOMA, LICENSE NUMBER 5432, EXPIRATION DATE 12/31/21.