



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: 12/26/17

Permit No.: B17004491

Building Address: 15321 Galaxy Drive
 City: Woodbine State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: 6P-17-81
 Census Tract: _____ Subdivision: Fairlane Farm
 Section: _____ Area: _____ Lot: 6
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Vacant lot
 Proposed Use: Single family house
 Estimated Construction Cost: \$ 250,000
 Description of Work: New 2 story "Regents Park II" w/2 car garage, Elev K, morning room, and finished lower level (rec rm, bathroom)
 Occupant or Tenant: _____
 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 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 Lewis Clint Cagle
 Address: 9720 Patuxent Woods Drive
 City: Columbia State: MD Zip Code: 21046
 License No.: 56
 Phone: 410-379-5956 Fax: _____
 Email: CCagle@NVRINC.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:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input checked="" 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: <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	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<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	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" 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.

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

Jim Kerwin
 Print Name
12/26/2017
 Date

RECEIVED

DEC 26 2017

LICENSES & PERMITS

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>1/9/18</u>	<u>H. Oswald</u>

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
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check #	<u>150198</u>

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



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: Feb 15 2018

Permit No.: B18000511

Building Address: 15321 Galaxy Dr
City: Woodburn State: MD Zip Code: 21797
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Fairbairn Farm
Section: _____ Area: _____ Lot: 6
Tax Map: 8 Parcel: 8 Grid: 2
Zoning: _____ Map Coordinates: _____ Lot Size: 43,265 sq ft

Existing Use: SFD
Proposed Use: SFD w/ propane tank
Estimated Construction Cost: \$ 8000
Description of Work: Install 1000 gal in-ground propane tank

Occupant/Tenant Name: _____
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: owner
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:
Area of construction (sq. ft.):	2 nd floor:
Use group:	Basement:
	<input type="checkbox"/> Finished Basement
	<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:
<input checked="" type="checkbox"/> Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: NUR Inc
Address: 9720 Potomac Woods Dr
City: Columbia State: MD Zip Code: 21116
Phone: 410-60-9300 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: 21228
Phone: 443-610-7514 Fax: _____
Email: Michelle@AppliedAndApproved.com

Contractor Company: TCCU AIR
Contact Person: Dennis Feege
Address: 1560 A-D Caron Center Dr
City: Baltimore State: MD Zip Code: 21227
License No.: B1215
Phone: 410-984-5681 Fax: _____
Email: _____

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

Utilities	
Electric:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Gas:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<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 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: Michelle Clancy
Print Name: Michelle Clancy
Date: 2/14/18
Email Address: Michelle@AppliedAndApproved.com
Title/Company: Permits

RECEIVED
FEB 15 2018
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
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>2/20/18</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:

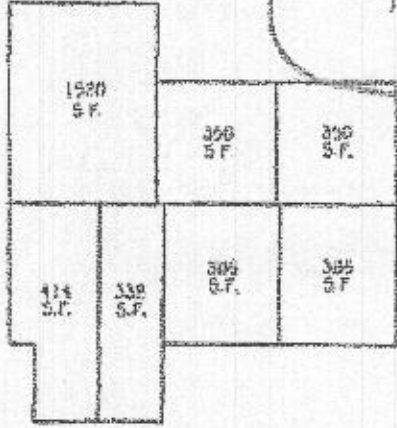
Filing Fee	\$
Permit Fee	\$ 100
Tech Fee	\$ 10
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ 110.00
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>6521</u>

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

NOTE: THE EXISTING WELL SHOWN ON THIS PLAN, HO-15-0341, HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.

STORMWATER MANAGEMENT NOTES:

STORMWATER MANAGEMENT FOR LOT 6 IS BEING PROVIDED BY A COMBINATION OF NON-ROOFTOP DISCONNECTION (N-2) FOR THE DRIVEWAY AREA. THE REAR PORTIONS OF THE PROPOSED HOUSE ROOF AREAS ARE BEING TREATED BY TWO DRYWELLS (M-5). THE FRONT PORTIONS OF THE HOUSE ROOF AREAS WILL BE CONVEYED TO STR. 1-1 (WHICH CONVEYS THE DRAINAGE TO BMP NO. 1, A SURFACE SAND FILTER (P-1), LOCATED ON PARCEL 'E'.



HOUSE DRAINAGE AREAS:

SCALE: 1" = 30'

1000 sq ft LP

Wildlife observation Parcel 'E'

Lot 6
3,265.59 sq. Ft.

Approved for
UPT B18000511
R/AT 2/26/18

OWNER/DEVELOPER

SV HOMES
9720 PATUXENT WOODS DRIVE
COLUMBIA, MD 21046
410-374-5956

FISHER, COLLINS & CARTER, INC.

CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CORPORAL SERVICE OFFICE PARK - 10272 BALTIMORE NATIONAL PKWY.
ELICOTT CITY, MARYLAND 21042
(410) 461-2265

PLAN

SCALE: 1" = 30'

PERMIT SITE PLAN

LOT 6

15321 GALAXY DRIVE

FAIRLANE FARMS

PHASE ONE

ZONED: RC-DEO

TAX MAP NO.: B GRID NO.: 2 PARCEL NO.: B

5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND

SCALE: 1" = 30' DATE: DEC. 20, 2017

SHEET 1 OF 1

B17004491

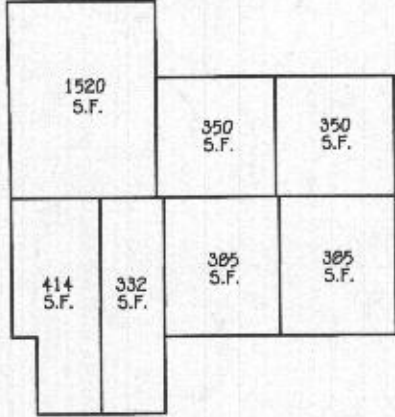
SHEET 3 of 3

Permit # R17004491

NOTE: THE EXISTING WELL SHOWN ON THIS PLAN, HO-15-0341, HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.

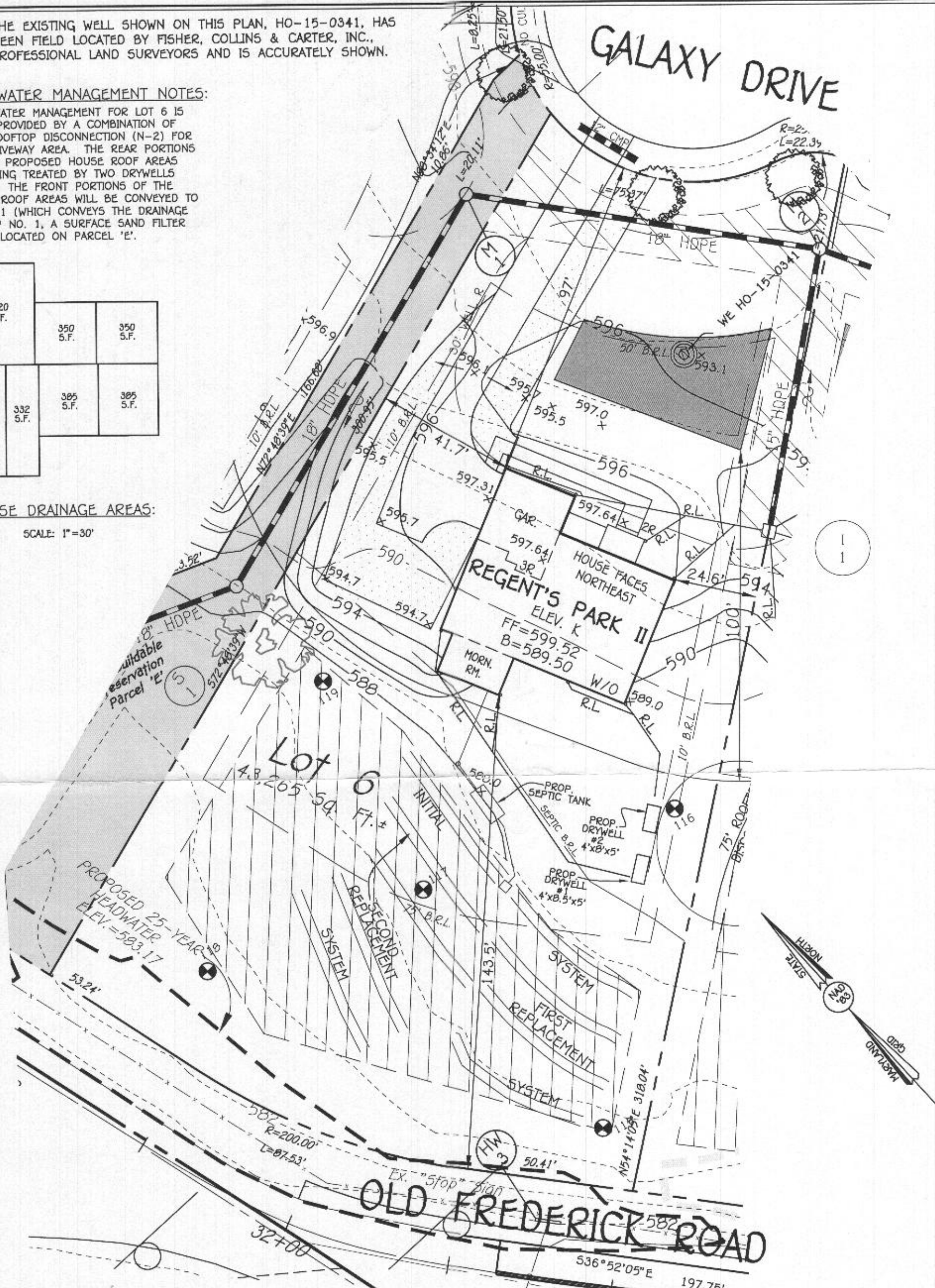
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HOUSE DRAINAGE AREAS:

SCALE: 1"=30'



1/9/18 - Site plan approved as shown for B17004491 (SFD) - H.O.

OWNER/DEVELOPER

NV HOMES
9720 PATUXENT WOODS DRIVE
COLUMBIA, MD 21046
410-379-5956

PLAN

SCALE: 1" = 30'

**PERMIT SITE PLAN
LOT 6**

15321 GALAXY DRIVE

FAIRLANE FARMS

PHASE ONE
ZONED: RC-DEO

TAX MAP NO.: 8 GRID NO.: 2 PARCEL NO.: 8
5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1"=30' DATE: DEC. 20, 2017

SHEET 1 OF 1

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLDOTT CITY, MARYLAND 21042
(410) 461 - 2855

Oswald, Hank

From: Oswald, Hank
Sent: Friday, January 05, 2018 9:31 AM
To: Cagle, Clint (ccagle@nvrinc.com)
Subject: B17004491_15321 Galaxy Drive_Lot 6

Hello Clint:

Good morning. I received the building permit and floor plans (4 BR potentially 5 BR) for 15321 Galaxy Drive but not the OSDS Plan. Please forward the OSDS Plan at your earliest convenience.

Thanks,

Hank

Hank Oswald
Licensed Environmental Health Specialist
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
8930 Stanford Boulevard
Columbia, MD 21045
410.313.1786 (Office)
hoswald@howardcountymd.gov

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Health 15321 Galaxy Drive lot 6 Fairlane Farm

B17004491

REGENT'S PARK II HEALTH DEPT



NVR, Inc.
Architectural Services
Architects
21 Byte Court, Suite A
Frederick, MD 21702

SPEC SHEET	FULL BASEMENT								CRAWL SPACE								ATTACHED GARAGE / ROOMS								STANDARD DETAILS				
	STD. DIMS.	ELEV. 'A'	ELEV. 'B'	ELEV. 'C'	ELEV. 'D'	ELEV. 'E'	ELEV. 'F'	ELEV. 'G'	STD. DIMS.	ELEV. 'A'	ELEV. 'B'	ELEV. 'C'	ELEV. 'D'	ELEV. 'E'	ELEV. 'F'	ELEV. 'G'	ELEV. 'H'	BEDROOM FIRST FLOOR	LIBRARY	MORNING ROOM	CONSERVATORY	SITTING AREA	SITTING AREA ALT. OWNERS	DECK		BONUS ROOM	BONUS BEDROOM	4' EXTENSION TO PANEL ROOM	
FRONT ELEVATIONS - SIDING	3	3	3	3					3	3	3	3	3	3	3	3													D-1
FRONT ELEVATIONS - PARTIAL STONE		4	4	4	4	4	4	4	4	4	4	4	4	4	4	4													D-2
FRONT ELEVATIONS - BRICK		5	5	5	5	5	5	5	5	5	5	5	5	5	5	5													D-3
FRONT ELEVATIONS - STONE AND BRICK		6	6	6	6	6	6	6	6	6	6	6	6	6	6	6													D-4
SIDE ELEVATIONS		7	7	7	7	7	7	7	7	7	7	7	7	7	7	7													D-5
REAR ELEVATIONS		8	8	8	8	8	8	8	8	8	8	8	8	8	8	8													D-6
FOUNDATION	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37													D-7
FOUNDATION HOLD DOWN LAYOUT	42	42	42	42	42	42	42	42	42	42	42	42	42	42	42	42													D-8
PLUMBING GROUND WORKS	43	43	43	43	43	43	43	43	43	43	43	43	43	43	43	43													D-9
BASEMENT PLAN	41	41	41	41	41	41	41	41	41	41	41	41	41	41	41	41													D-10
FIRST FLOOR PLAN	44	44	44	44	44	44	44	44	44	44	44	44	44	44	44	44													D-11
SECOND FLOOR PLAN	45	45	45	45	45	45	45	45	45	45	45	45	45	45	45	45													D-12
BUILDING SECTION AT PORCH	51	51	51	51	51	51	51	51	51	51	51	51	51	51	51	51													D-13
BUILDING SECTION AT GARAGE	63	63	63	63	63	63	63	63	63	63	63	63	63	63	63	63													D-14
STAIR PLAN - STANDARD	65, 65.2, 65																												D-15
STAIR PLAN - UPGRADE	66, 66.2, 67, 67.2, 67.3																												D-16
STAIR PLAN - UPGRADE	69, 70, 70.2																												D-17
KITCHEN PLANS - CABINET HOOD B	71																												D-18
KITCHEN PLANS - CABINET HOOD C	72																												D-19
KITCHEN PLANS - COURSEY	73																												D-20
INTERIOR DETAILS	74																												D-21
INTERIOR DETAILS - FIREPLACE	75																												D-22
INTERIOR DETAILS - TRIMMED OPENINGS	82, 82.2																												D-23
INTERIOR DETAILS - BATH ELEVATIONS	83																												D-24
EXTERIOR DETAILS	84																												D-25
BASEMENT ELECTRICAL	85																												D-26
FIRST FLOOR ELECTRICAL	86																												D-27
SECOND FLOOR ELECTRICAL	87																												D-28
FIRST FLOOR JOIST LAYOUT	108																												D-29
SECOND FLOOR JOIST LAYOUT	109																												D-30
ROOF FRAMING	111																												D-31
ROOF FRAMING - ALTERNATE OWNERS SUITE	112																												D-32
TRUSS BRACING	126, 126, 130, 131, 132, 134, 134																												D-33
BRACED WALL PANEL DETAIL	134																												D-34
BASEMENT HVAC LAYOUT	137, 137.2, 138																												D-35
CRAWL FLOOR HVAC LAYOUT	139																												D-36
FIRST FLOOR HVAC LAYOUT	140, 140.2																												D-37
SECOND FLOOR HVAC LAYOUT	141, 141.2																												D-38

BASE SQUARE FOOTAGE		
FIRST FLOOR	GROSS SQ. FT.	2111
SECOND FLOOR	GROSS SQ. FT.	1544
HOUSE TOTAL	GROSS SQ. FT.	3655

ELEVATIONS SQ. FT.		
ELEVATION 'B'	GROSS SQ. FT.	+0
ELEVATION 'C'	GROSS SQ. FT.	+46
ELEVATION 'D'	GROSS SQ. FT.	-84
ELEVATION 'E'	GROSS SQ. FT.	+110
ELEVATION 'F'	GROSS SQ. FT.	+0
ELEVATION 'G'	GROSS SQ. FT.	+46

ADDITIONAL SQ. FT.		
MORNING ROOM	GROSS SQ. FT.	1240
W/ NO SECOND FLOOR	GROSS SQ. FT.	4984
W/ SITTING AREA	GROSS SQ. FT.	4984
W/ ALT. OWNER'S SUITE	GROSS SQ. FT.	1452
4' EXTENSION	GROSS SQ. FT.	1104
W/ NO BONUS RM. / BEDRM.	GROSS SQ. FT.	1104
BONUS RM. / BEDROOM	GROSS SQ. FT.	1326
W/ 4' EXTENSION	GROSS SQ. FT.	1420
CONSERVATORY / IN-LAM'S SUITE	GROSS SQ. FT.	1852
W/ 4-BEDROOM	GROSS SQ. FT.	1852
W/ 5-BEDROOM	GROSS SQ. FT.	1704

MAXIMUM FINISHED SQ. FT.		
HOUSE TOTAL	GROSS SQ. FT.	5143
*MAXIMUM SQ. FT. DOES NOT INCLUDE BASEMENT		

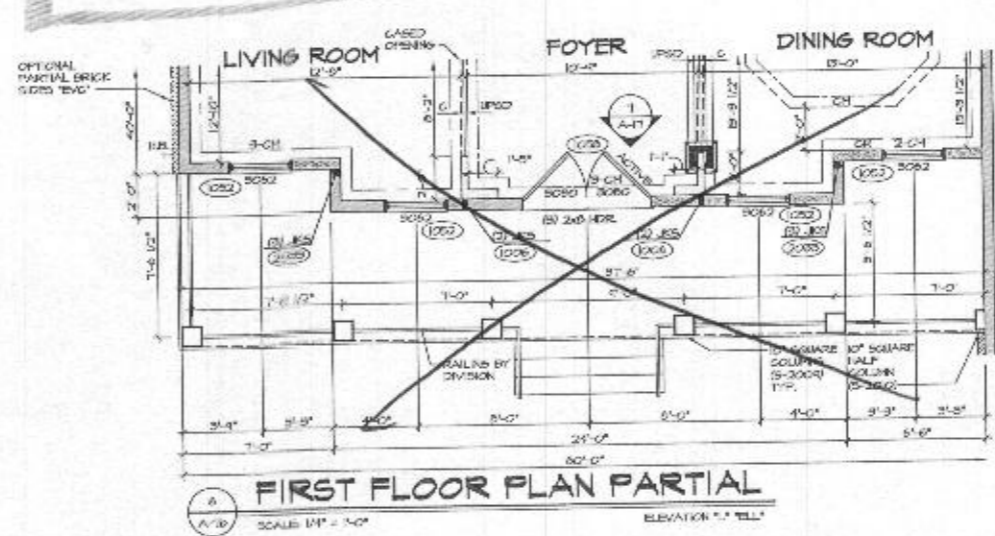
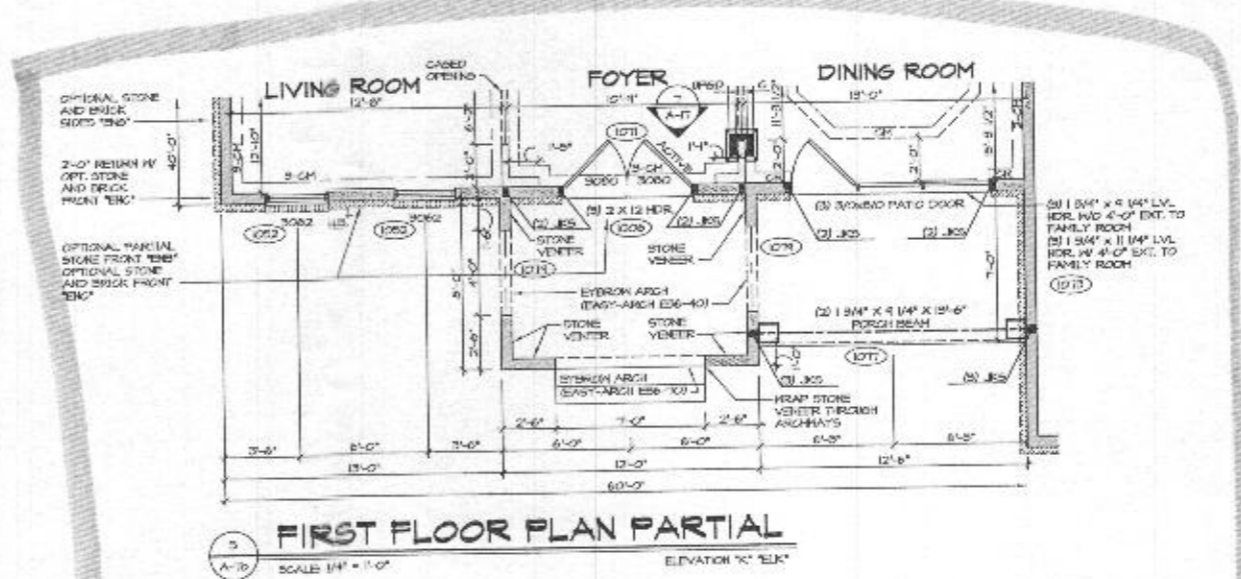
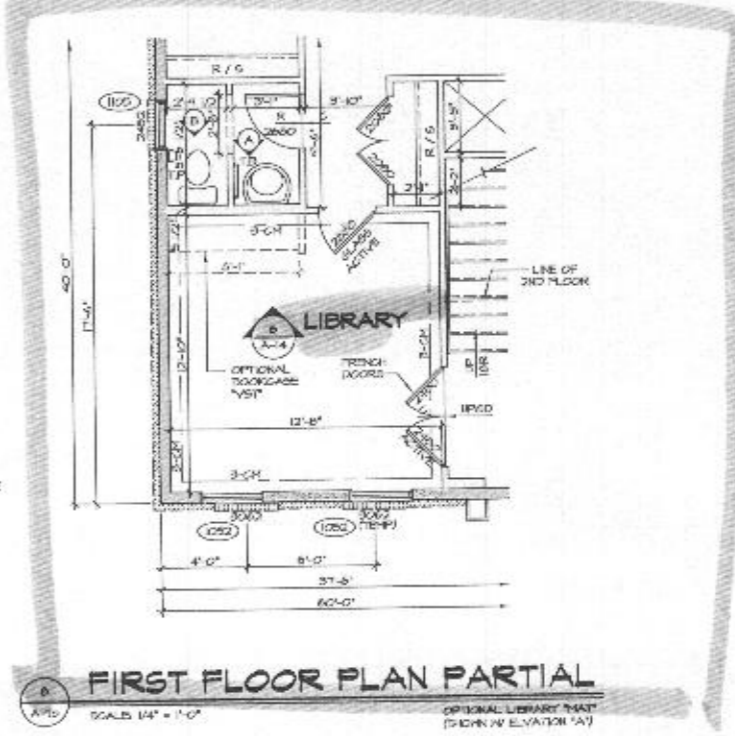
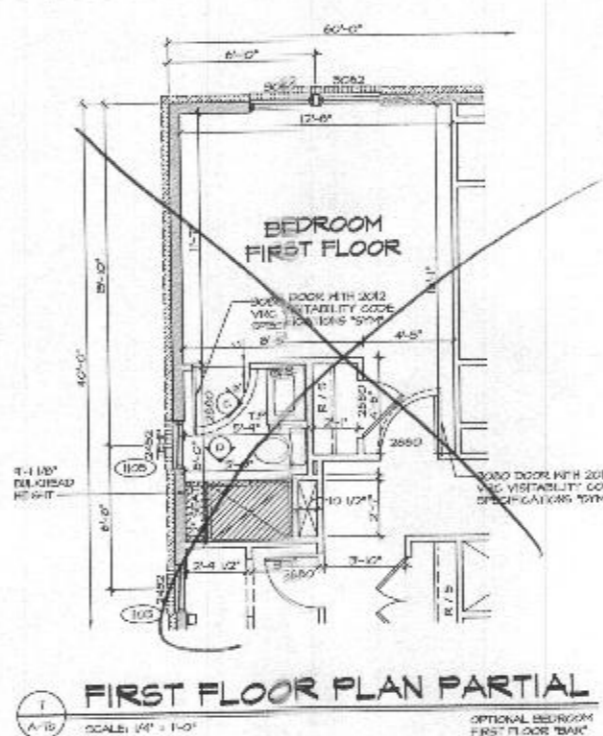
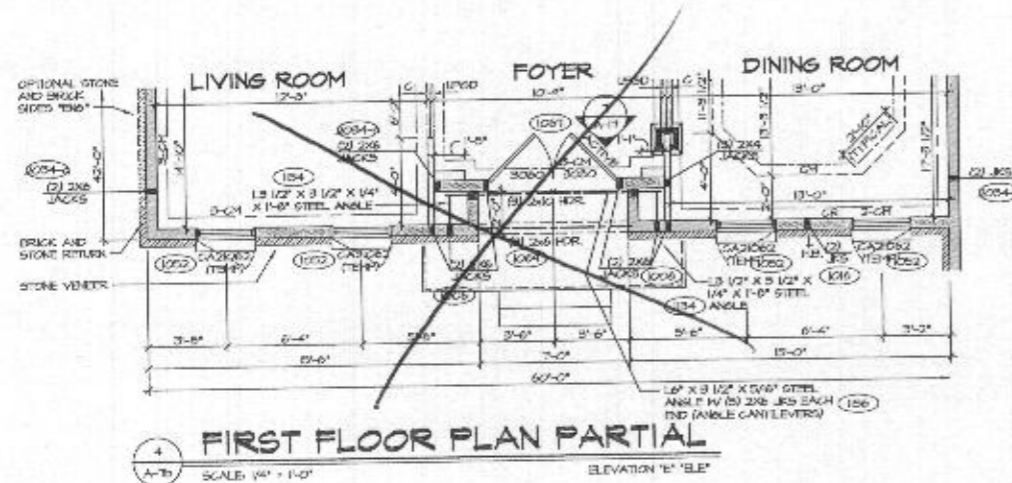
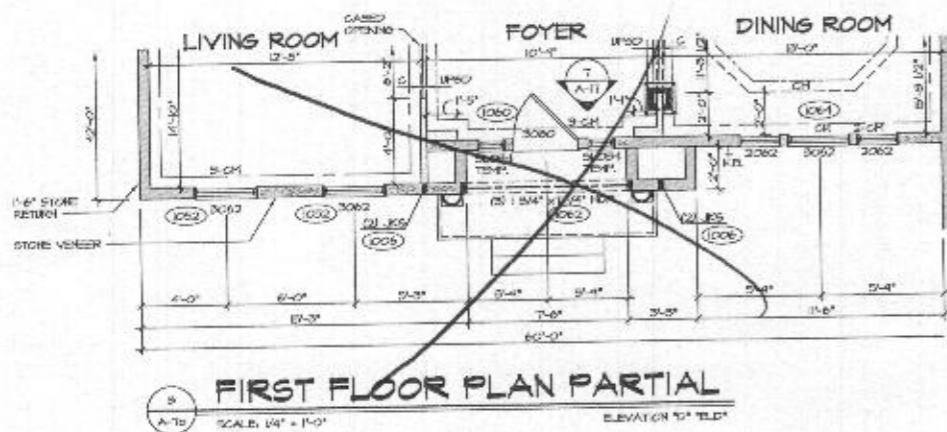
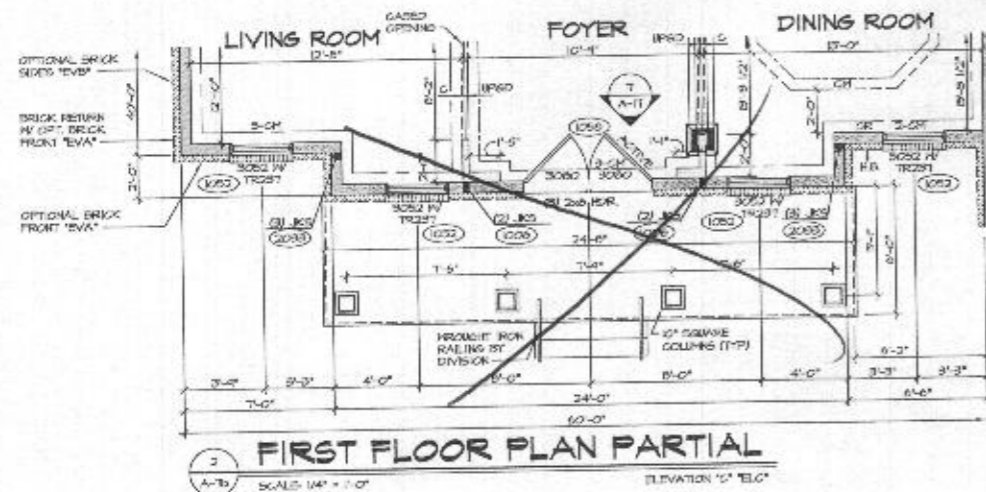
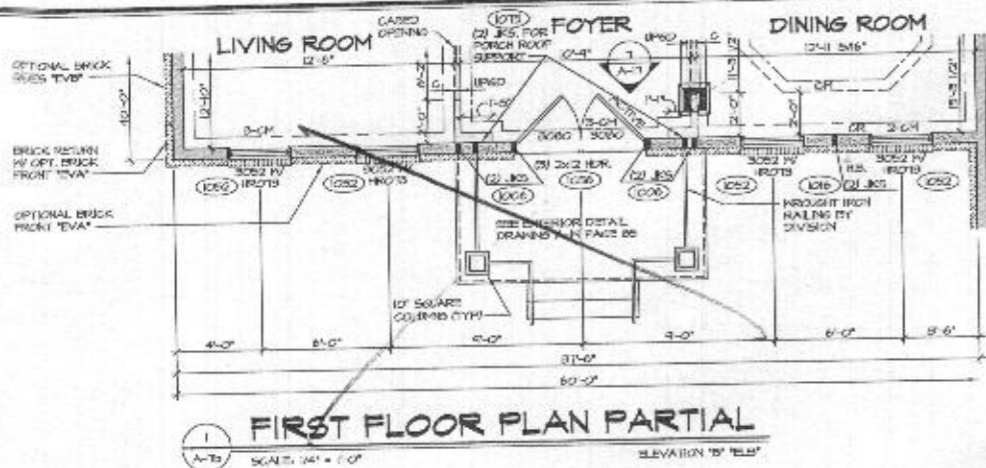
FINISHED BASEMENT SQ. FT.		
RECREATION ROOM	GROSS SQ. FT.	1110
W/ MORNING ROOM	GROSS SQ. FT.	+240
W/ 4' EXTENSION	GROSS SQ. FT.	194
W/ MOR RM + 4' EXTEN	GROSS SQ. FT.	634
HOME OFFICE	GROSS SQ. FT.	240
EXERCISE RM. ('A', 'B', 'C')	GROSS SQ. FT.	216
EXERCISE RM. ('C', 'L')	GROSS SQ. FT.	256
EXERCISE RM. ('D')	GROSS SQ. FT.	240
EXERCISE RM. ('E')	GROSS SQ. FT.	240
MEDIA RM. ('A', 'B', 'D', 'K')	GROSS SQ. FT.	402
MEDIA RM. ('C', 'L')	GROSS SQ. FT.	480
MEDIA RM. ('E')	GROSS SQ. FT.	480
BASEMENT BATH	GROSS SQ. FT.	57

UNFINISHED SQ. FT.		
THO CAR GARAGE (W/ 'A')	GROSS SQ. FT.	558
THREE CAR GARAGE (W/ 'A')	GROSS SQ. FT.	628

FOOTPRINT		
BASE HOUSE:		
WIDTH:	60'-0"	
DEPTH:	52'-0"	
MAXIMUM:		
WIDTH:	76'-6"	
DEPTH:	76'-6"	

SET - VERSION	10200-01	CS-1
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10/23/17 - 2:00 PM



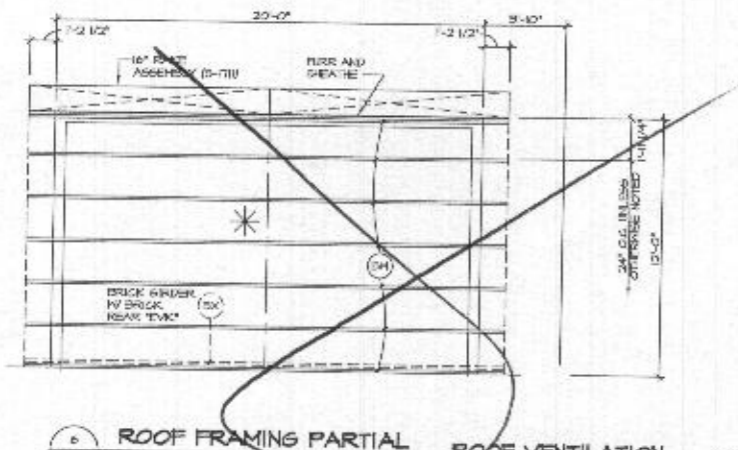
- NOTES:**
1. ALL HEADERS ARE (B) 2x6, UNLESS OTHERWISE NOTED.
 2. ALL EXTERIOR WALLS ARE 6" UNLESS OTHERWISE NOTED.
 3. ALL INTERIOR WALLS ARE 5/8" UNLESS OTHERWISE NOTED.
 4. WATCHED AREAS BECAUSE DISCLOSED (C) 1x4.
 5. ALL HEADERS ARE AT 1'-0" UNLESS OTHERWISE NOTED.
 6. HANGERS ALWAYS ON THE LEFT PER PLAN OR REVERSE PLAN (WHERE APPLICABLE).
 7. JACKS MUST EXTEND THROUGH TOP PLATES OF WALL TO BEAR DIRECTLY ON BOTTOM CHORD OF BRICK TRUSS AT LOCATIONS NOTED.
- NOTE:**
SEE SHEET S-5 FOR BRACED WALL PANEL LOCATIONS

<p>REVISIONS</p> <table border="1"> <tr><th>REV. NO.</th><th>DATE</th><th>DESCRIPTION</th></tr> <tr><td>1</td><td></td><td></td></tr> <tr><td>2</td><td></td><td></td></tr> <tr><td>3</td><td></td><td></td></tr> <tr><td>4</td><td></td><td></td></tr> <tr><td>5</td><td></td><td></td></tr> <tr><td>6</td><td></td><td></td></tr> <tr><td>7</td><td></td><td></td></tr> <tr><td>8</td><td></td><td></td></tr> <tr><td>9</td><td></td><td></td></tr> </table>	REV. NO.	DATE	DESCRIPTION	1			2			3			4			5			6			7			8			9			<p>DATE: 09/15/07</p> <p>PROJECT: REGENT'S PARK II</p> <p>CLIENT: JEA</p> <p>ARCHITECT: NVR</p> <p>11000 STATEMENT BLVD, SUITE 100, ROCKFORD, IL 61107</p>	<p>REVISIONS</p> <p>1. NEW WALLS ON EXISTING WALLS ON 2ND FLOOR</p> <p>2. ADDED BRICK RETURN TO FRONT PORCH</p> <p>3. ADDED BRICK RETURN TO FRONT PORCH</p> <p>4. ADDED BRICK RETURN TO FRONT PORCH</p> <p>5. ADDED BRICK RETURN TO FRONT PORCH</p> <p>6. ADDED BRICK RETURN TO FRONT PORCH</p> <p>7. ADDED BRICK RETURN TO FRONT PORCH</p> <p>8. ADDED BRICK RETURN TO FRONT PORCH</p> <p>9. ADDED BRICK RETURN TO FRONT PORCH</p>
REV. NO.	DATE	DESCRIPTION																														
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2																																
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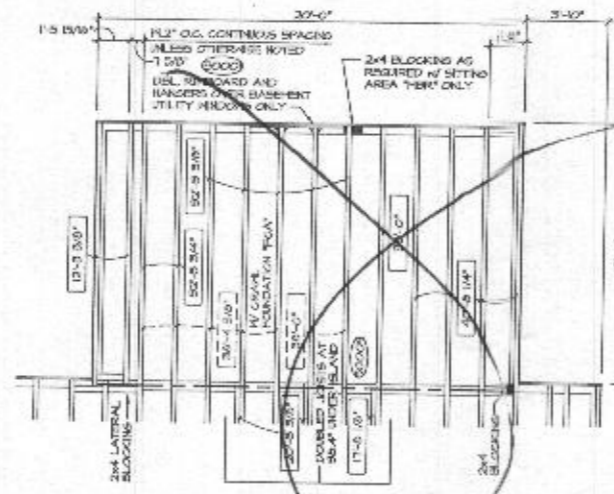


<p>PROJECT: REGENT'S PARK II</p> <p>DATE: 09/15/07</p> <p>SCALE: 1/4" = 1'-0"</p>	<p>OPTION: ELEVATION 'D', ELEVATION 'E', ELEVATION 'F', ELEVATION 'G', ELEVATION 'H', ELEVATION 'I', ELEVATION 'J', ELEVATION 'K', ELEVATION 'L', ELEVATION 'M', ELEVATION 'N', ELEVATION 'O', ELEVATION 'P', ELEVATION 'Q', ELEVATION 'R', ELEVATION 'S', ELEVATION 'T', ELEVATION 'U', ELEVATION 'V', ELEVATION 'W', ELEVATION 'X', ELEVATION 'Y', ELEVATION 'Z'</p>
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<p>SHEET NO. A-7D</p> <p>DATE: 09/15/07</p> <p>SCALE: 1/4" = 1'-0"</p>	<p>PROJECT: REGENT'S PARK II</p> <p>DATE: 09/15/07</p> <p>SCALE: 1/4" = 1'-0"</p>
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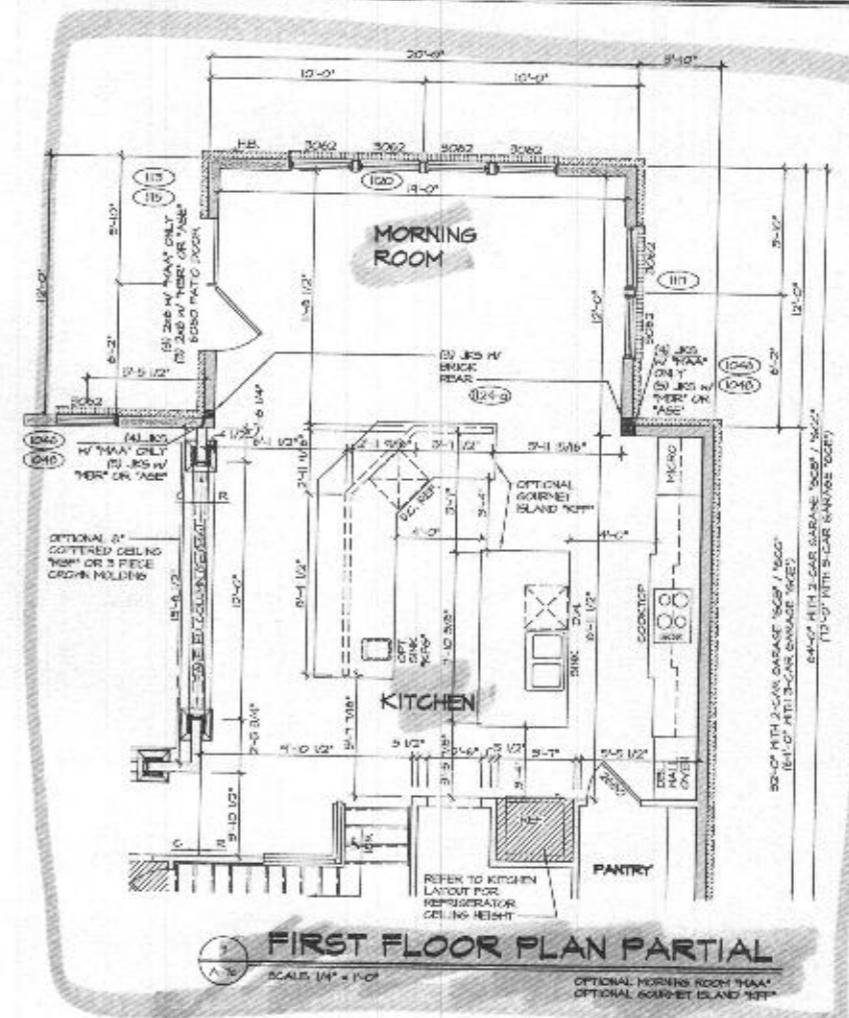
6 ROOF FRAMING PARTIAL
 SCALES: 1/4" = 1'-0"
ROOF VENTILATION (AS REQUIRED)
 TOTAL PLAN AREA: 126.31 SQ. FT.
 TOTAL VENTILATION REQUIRED: 42.50 SQ. FT.
 ACTUAL VENTILATION:
 RISE VENT: 36.0 SQ. FT.
 ROOF VENT - HIGH: 3.0 SQ. FT.
 ROOF VENT - LOW: 3.5 SQ. FT.
 ACTUAL VENTILATION TOTAL: 42.5 SQ. FT.



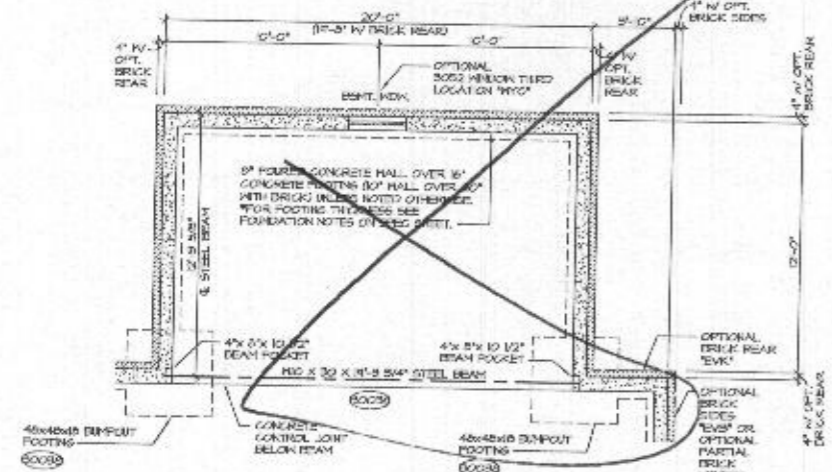
8 PARTIAL FRAMING PLAN
 SCALES: 1/4" = 1'-0"
MORNING ROOM

NOTES:
 1. ALL HEADERS ARE (2) 2x6, UNLESS OTHERWISE NOTED.
 2. ALL EXTERIOR WALLS ARE OF UNLESS OTHERWISE NOTED.
 3. HATCHED AREAS INDICATE DROPPED CEILING.
 4. ALL GATED OPENINGS AT THIS UNLESS OTHERWISE NOTED.
 5. MASTER ALWAYS ON THE LEFT PER PLAN OR REVERSE PLAN UNLESS OTHERWISE NOTED.
 6. JACKS MUST EXTEND THROUGH TOP PLAYS OF WALL TO DEAK DIRECTLY ON BOTTOM CHORD OF HOOKY TRUSS AT LOCATIONS NOTED.

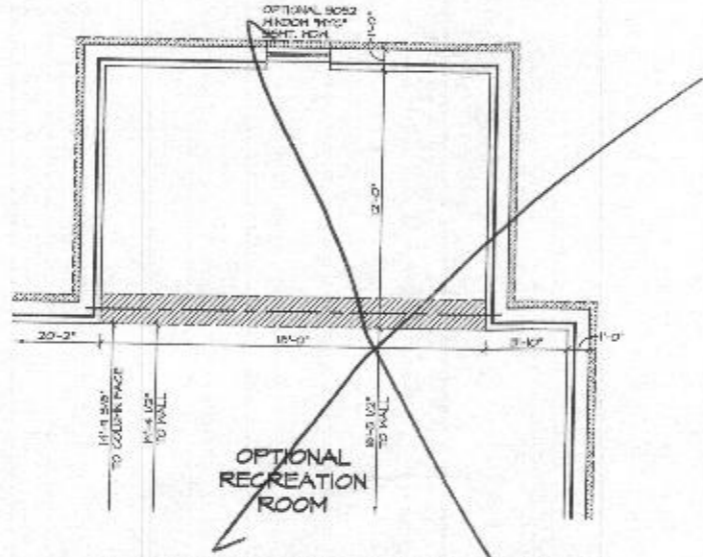
NOTE:
 SEE SHEET S-5 FOR BEADED WALL PANEL LOCATIONS



9 FIRST FLOOR PLAN PARTIAL
 SCALES: 1/4" = 1'-0"
MORNING ROOM
KITCHEN
PANTRY



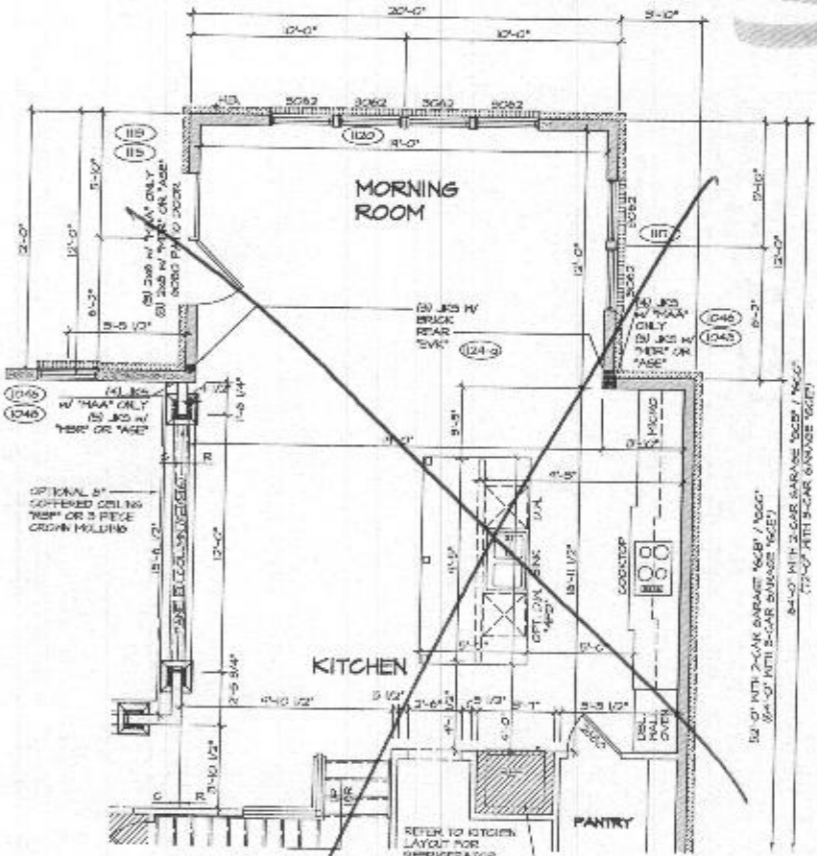
1 FOUNDATION PLAN PARTIAL
 SCALES: 1/4" = 1'-0"
MORNING ROOM



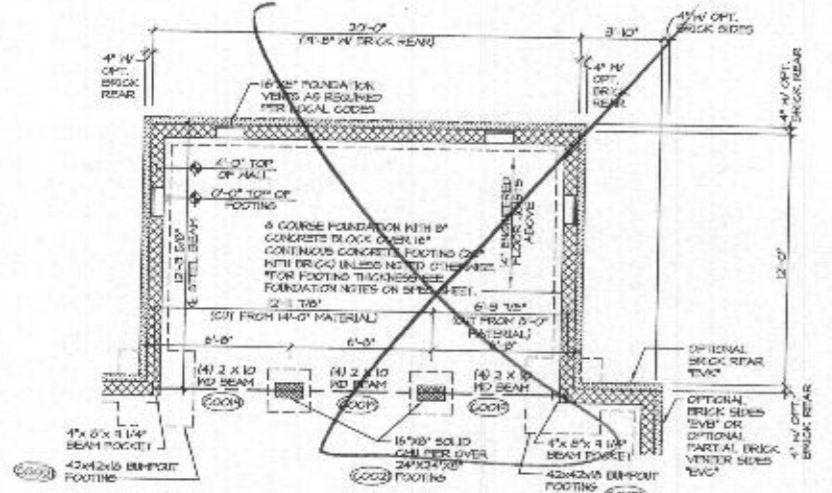
3 BASEMENT PLAN PARTIAL
 SCALES: 1/4" = 1'-0"
OPTIONAL RECREATION ROOM

CRAWL VENTILATION:
 ALL VENTILATION CALCULATIONS AND GRAPHS ARE CALCULATED WITH THE FOLLOWING FORMULAS AND ASSUMING A MINIMUM VENT AREA OF 42 SQ. FT.
 • AREA IN SQ. FT. / 500 = SQ. FT. OF VENTILATION REQUIRED.
 • SQ. FT. OF VENTILATION REQUIRED / .42 = MINIMUM NUMBER OF VENTS NEEDED.
 • NUMBER OF VENTS ON DRAWING X .42 = ACTUAL VENTILATION.
 (NOTE: FOR LOWER INFORMATION SEE SPEC. SHEET)

ROOM	TOTAL CRAWL AREA	TOTAL VENTILATION REQUIRED	REQUIRED NUMBER OF VENTS	ACTUAL NUMBER OF VENTS	ACTUAL VENTILATION
MORNING ROOM	324.15	15	4	1.00	56.17



4 FIRST FLOOR PLAN PARTIAL
 SCALES: 1/4" = 1'-0"
MORNING ROOM
KITCHEN
PANTRY



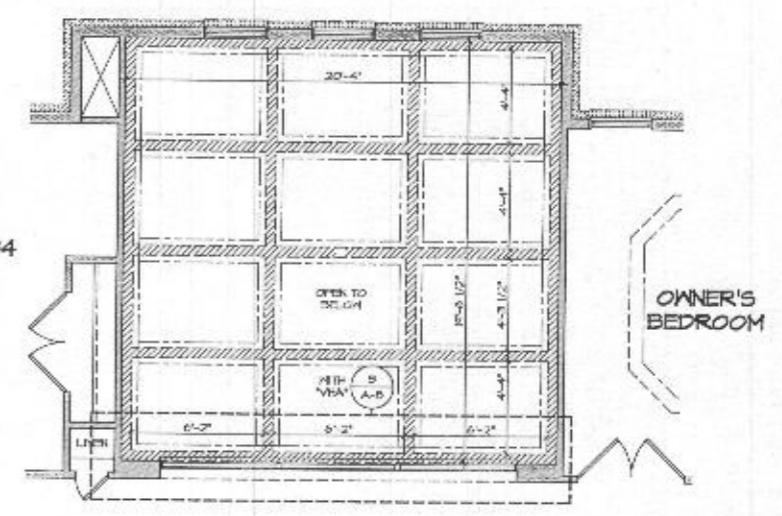
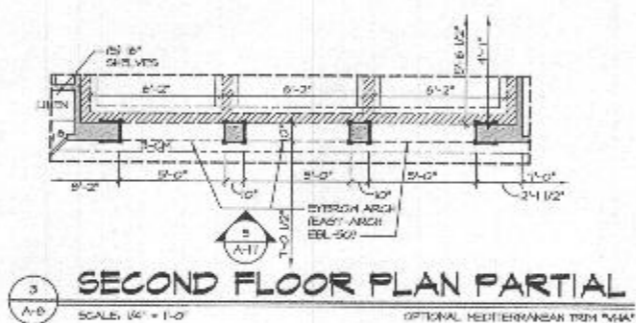
2 FOUNDATION PLAN PARTIAL
 SCALES: 1/4" = 1'-0"
MORNING ROOM

REVISIONS

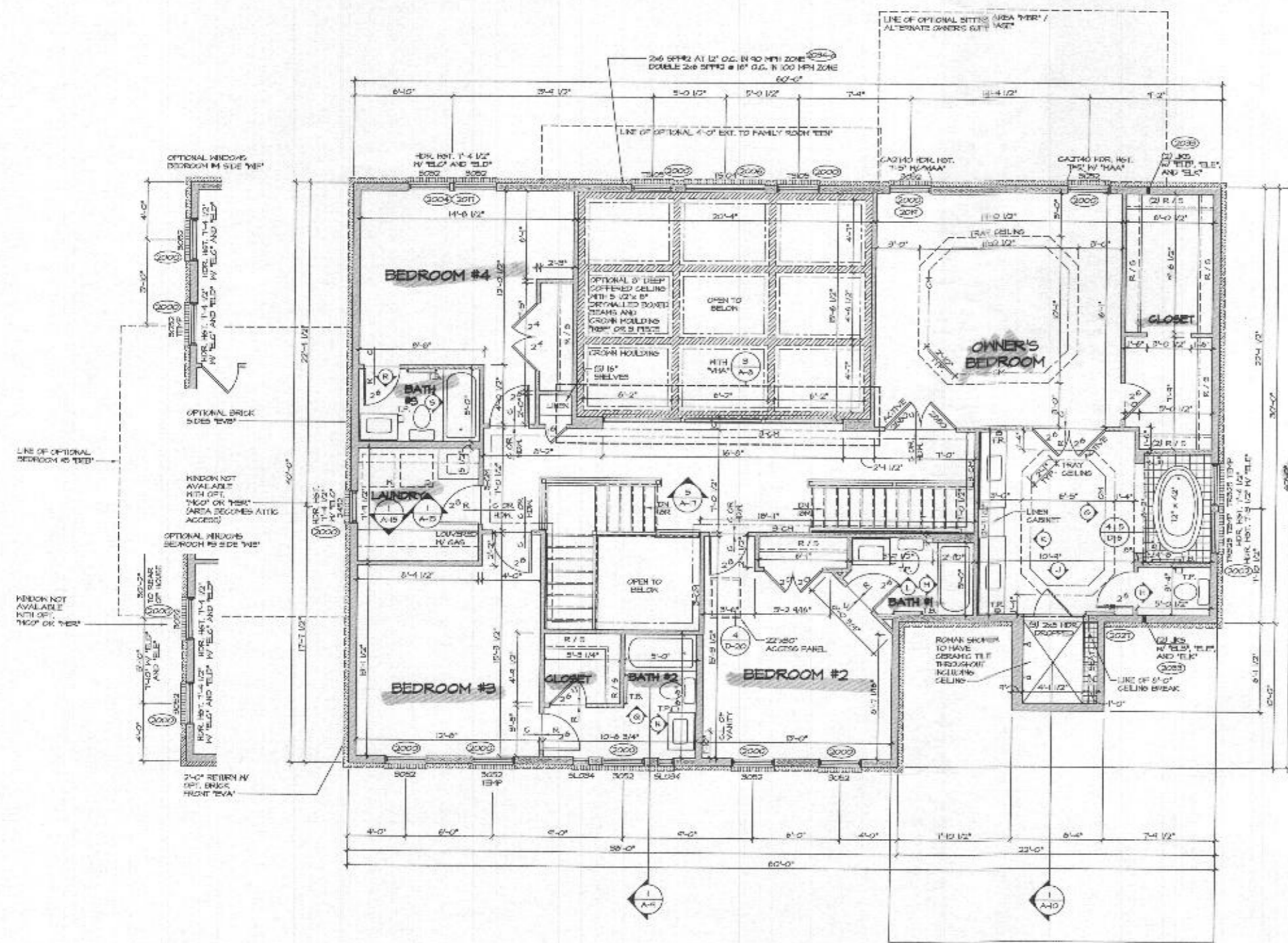
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2	08/14/12	REVISED PER PERMITS
3	08/14/12	REVISED PER PERMITS
4	08/14/12	REVISED PER PERMITS
5	08/14/12	REVISED PER PERMITS
6	08/14/12	REVISED PER PERMITS
7	08/14/12	REVISED PER PERMITS
8	08/14/12	REVISED PER PERMITS

NVR
 NVR, INC.
 ARCHITECTURAL SERVICES
 21 S. BROADWAY
 FREDERICK, MD 21702

REGENT'S PARK II
 SHEET NO. **A-7C**
 FLOOR PLAN PARTIAL
 MORNIG ROOM
 51



See Page 57 for owner bathroom layout



1
A-B
SCALE: 1/4" = 1'-0"
ELEVATOR W/ BAL

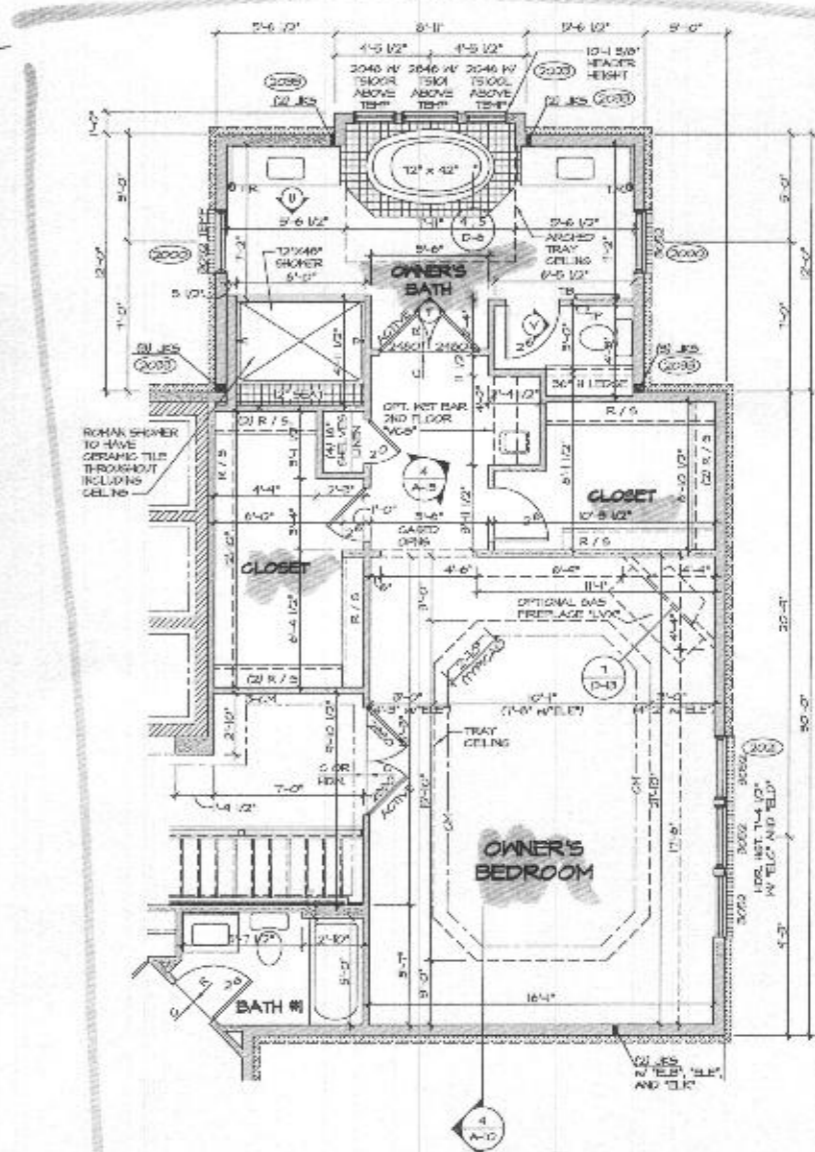
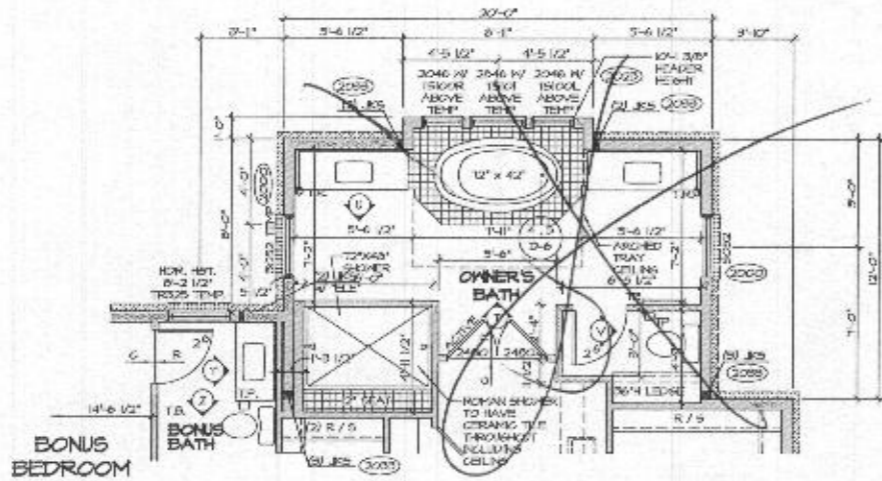
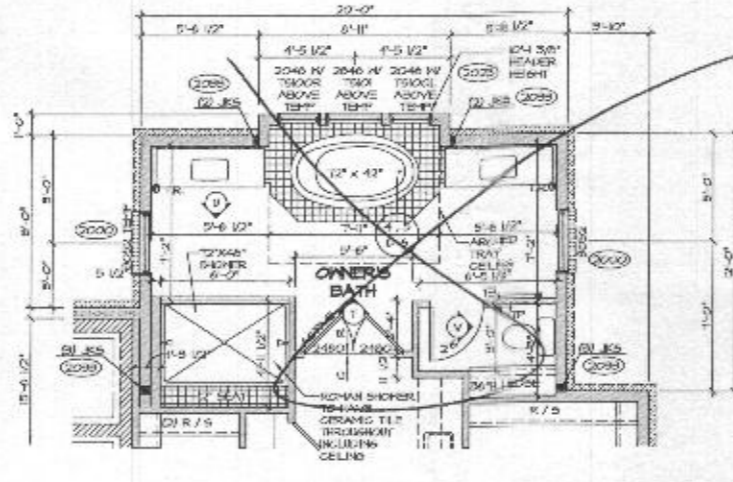
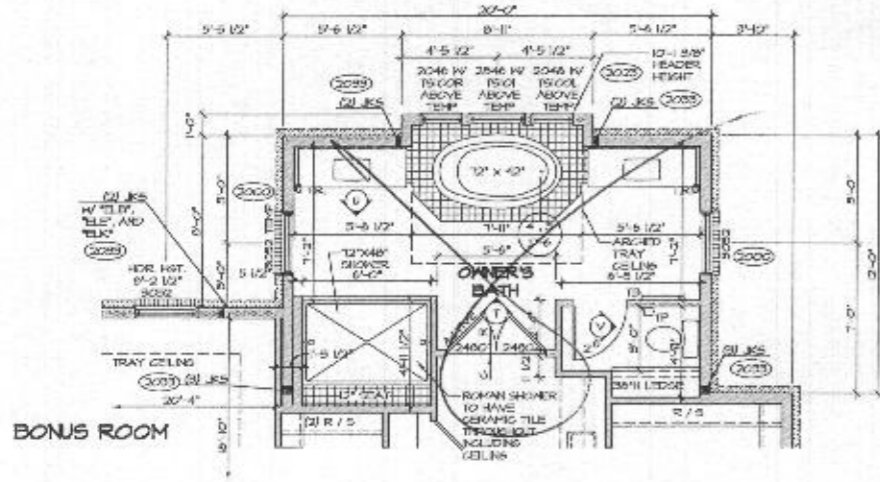
- NOTES:
1. ALL DOORS ARE 6'-0" UNLESS OTHERWISE NOTED.
 2. ALL EXTERIOR WALLS ARE 6" UNLESS OTHERWISE NOTED.
 3. ALL INTERIOR WALLS ARE 5 1/2" UNLESS OTHERWISE NOTED.
 4. HATCHED AREAS INDICATE CRIPPLED CEILING.
 5. ALL CASED OPENINGS AT 6'-0", UNLESS OTHERWISE NOTED.
 6. HATCHED ALWAYS ON THE LEFT PER PLAN OR REVERSE PLAN (WHERE APPLICABLE).

NOTE:
SEE SHEET 3-B FOR BRACED WALL PANEL LOCATIONS

<p>REVISIONS</p> <table border="1"> <tr> <th>REV. NO.</th> <th>DATE</th> <th>DESCRIPTION</th> </tr> <tr> <td>1</td> <td>04/25</td> <td>ISSUE FOR PERMITS</td> </tr> <tr> <td>2</td> <td>05/01</td> <td>ISSUE FOR PERMITS</td> </tr> <tr> <td>3</td> <td>05/01</td> <td>ISSUE FOR PERMITS</td> </tr> <tr> <td>4</td> <td>05/01</td> <td>ISSUE FOR PERMITS</td> </tr> <tr> <td>5</td> <td>05/01</td> <td>ISSUE FOR PERMITS</td> </tr> <tr> <td>6</td> <td>05/01</td> <td>ISSUE FOR PERMITS</td> </tr> <tr> <td>7</td> <td>05/01</td> <td>ISSUE FOR PERMITS</td> </tr> <tr> <td>8</td> <td>05/01</td> <td>ISSUE FOR PERMITS</td> </tr> <tr> <td>9</td> <td>05/01</td> <td>ISSUE FOR PERMITS</td> </tr> <tr> <td>10</td> <td>05/01</td> <td>ISSUE FOR PERMITS</td> </tr> </table>		REV. NO.	DATE	DESCRIPTION	1	04/25	ISSUE FOR PERMITS	2	05/01	ISSUE FOR PERMITS	3	05/01	ISSUE FOR PERMITS	4	05/01	ISSUE FOR PERMITS	5	05/01	ISSUE FOR PERMITS	6	05/01	ISSUE FOR PERMITS	7	05/01	ISSUE FOR PERMITS	8	05/01	ISSUE FOR PERMITS	9	05/01	ISSUE FOR PERMITS	10	05/01	ISSUE FOR PERMITS
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<p>PROJECT NO. 10000</p> <p>PROJECT TITLE REGENT'S PARK II SECOND FLOOR PLAN</p>	<p>DATE: 03/11/17</p> <p>BY: JRA</p> <p>CHECKED: JRA</p> <p>SCALE: 1/4" = 1'-0"</p>																																	
<p>SHEET NO. A-8</p>	<p>TOTAL SHEETS 54</p>																																	

- NOTES:**
1. ALL HEADERS ARE 2x6 UNLESS OTHERWISE NOTED.
 2. ALL EXTERIOR WALLS ARE 6" UNLESS OTHERWISE NOTED. ALL INTERIOR WALLS ARE 3 1/2" UNLESS OTHERWISE NOTED.
 3. HATCHED AREAS INDICATE DROPPED CEILING.
 4. ALL GATED OPENINGS AT 1'-0" UNLESS OTHERWISE NOTED.
 5. HADERS ALWAYS ON THE LEFT FOR IN AN OR REVERSE PLAN WHERE APPLICABLE.
 6. JACKS MUST EXTEND THROUGH TOP PLATES OF WALL TO BEAR DIRECTLY ON BOTTOM CHORD OF STUDIER IRISSE AT LOCATIONS NOTED.

NOTE:
SEE SHEET S-5 FOR DRAGGED WALL PANEL LOCATIONS



SHEET NO. A-8c	PROJECT REGENT'S PARK II	DATE 1/11/13	REV. NO.	DATE	DESCRIPTION
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