



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: 2/22/18
Permit No.: B18000609

Building Address: 5034 CRANFORD MARBLE CRT
City: CRANFORD State: MD Zip Code: 21113
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: 153
Section: _____ Area: _____ Lot: 153
Tax Map: 38 Parcel: 47 Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: 153

Existing Use: V
Proposed Use: 500
Estimated Construction Cost: \$ 250,000
Description of Work: 1.5 car lift, deck, stairs, etc.
Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: MR. JESSIE T. JEFF
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: CRANFORD MARBLE
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: <u>3</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 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 type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>6180000110</u>	
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: 2/22/18

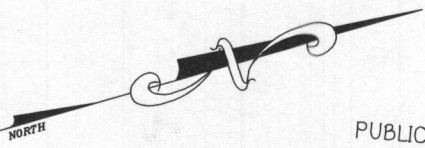
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		<u>3-B-B. Bevard</u>

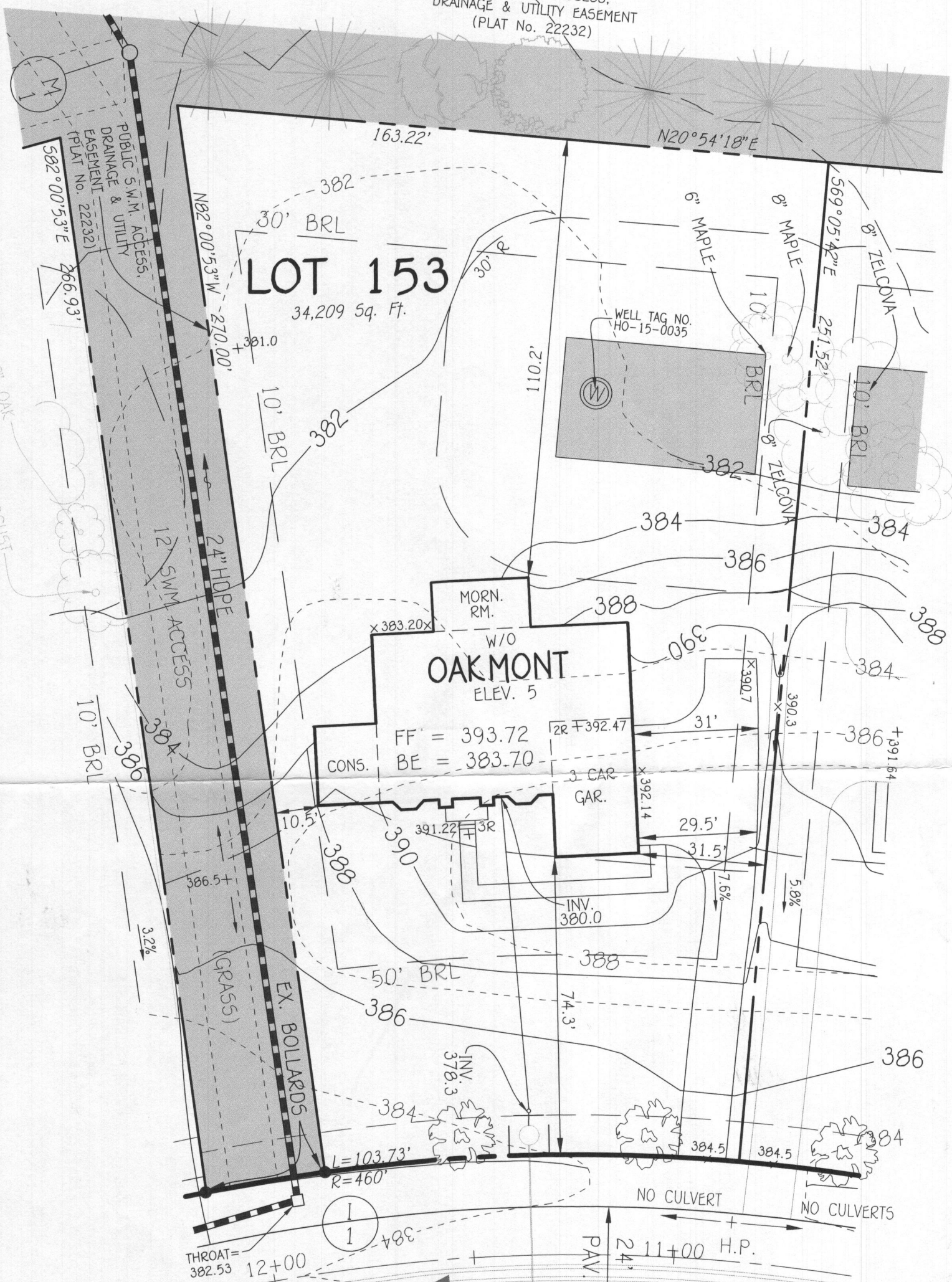
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

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	\$ <u>100</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#



PUBLIC STORMWATER
MANAGEMENT, ACCESS,
DRAINAGE & UTILITY EASEMENT
(PLAT No. 22232)



CRAPE MYRTLE CT.

Approved Septic System Plan
Howard County Health Department

Dina Powell 3-13-18
Signature Date

PLAN
SCALE: 1" = 30'

B18 000609
PERMIT SITE PLAN
LOT 153
5034 CRAPE MYRTLE COURT
WALNUT CREEK

WELL CERTIFICATION:
THE EXISTING WELL, TAG NO. HO-15-0135, HAS BEEN
FIELD LOCATED AND IS ACCURATELY SHOWN.

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL #1E
ELLCOTT CITY, MARYLAND 21042
(410) 461 - 2855

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

ZONED: RC-DEO
TAX MAP NO.: 28 PARCEL NO. 49 GRID NO.: 17 & 18
FIFTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1" = 30' DATE: FEB. 12, 2018

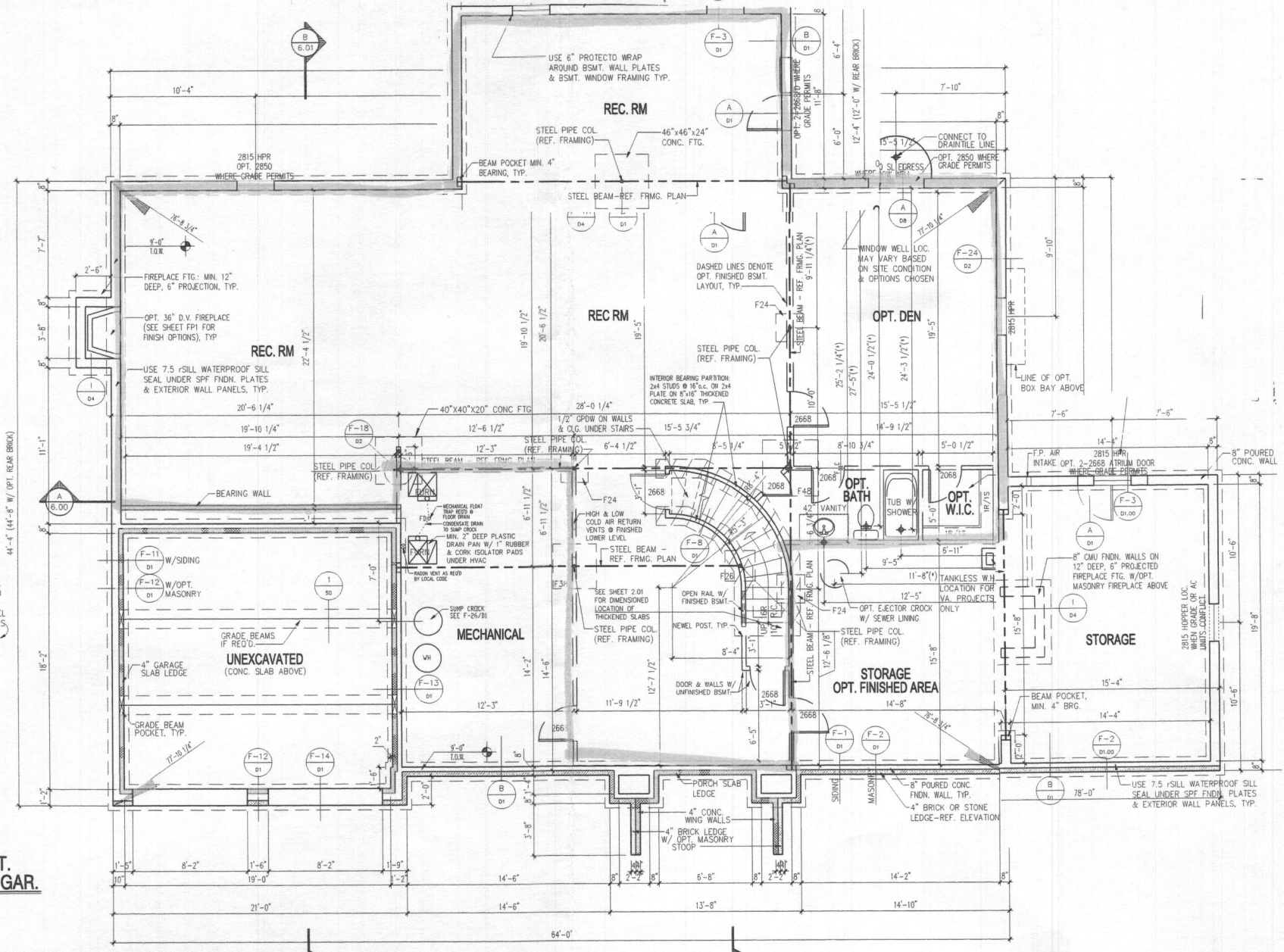
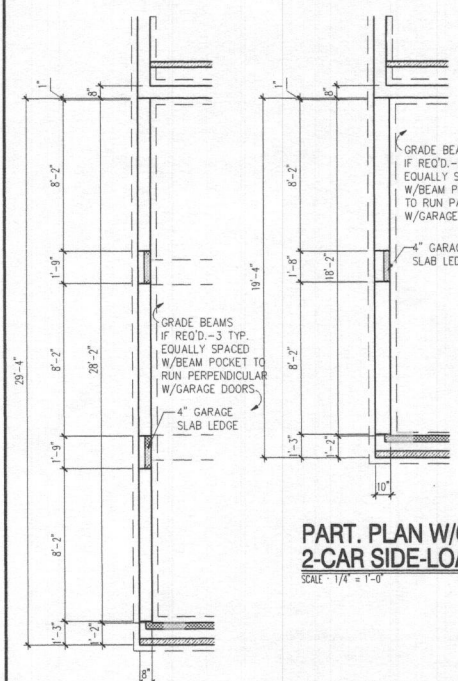
HEALTH

B18000609

Walnut Creek - Lot 153 - 5034 Crape Myrtle Ct.
5 Bedroom 5 1/2 Baths
Ellicott City, MD 21042

■ = finished Areas

NOTE:
 1) EXHAUST FANS THAT VENT TO THE EXTERIOR WILL BE INSTALLED IN ALL BATHS WITHOUT WINDOWS.
 2) PROVIDE @ LEAST 1 HANDRAIL FOR STAIRS HAVING 4 OR MORE RISERS.
 3) GLASS DOORS, SIDE-LITES, & SHOWER ENCLOSURES TO BE SAFETY GLAZED.
 4) SMOKE DETECTORS ON EACH FLOOR LEVEL.
 5) OPTIONAL WINDOWS AVAILABLE ONLY WHERE GRADE PERMITS.
 6) ALL INTERIOR PARTITIONS 3/4" UNLESS NOTED OTHERWISE.



NOTE:
(*) - REFERENCE B/ D/1

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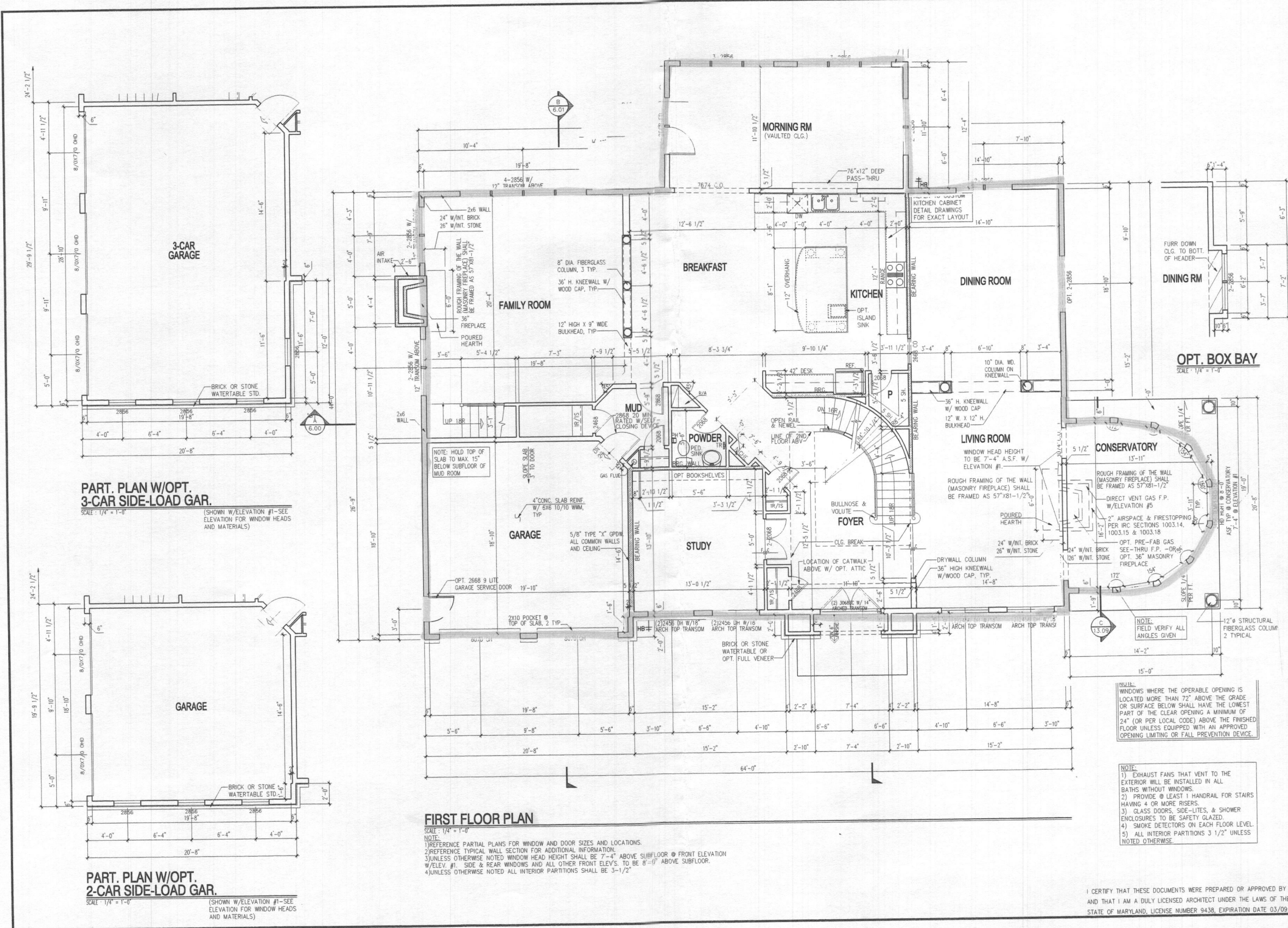
PINNACLE DESIGN & CONSULTING INC.
 ARCHITECTURE • PLANNING • CONSULTING • MARKET ANALYSIS • INTERIORS
 11150 Fairfax Blvd. • Suite 402 • Fairfax, Virginia 22030
 Ph: 703.218.1400 • Fax 703.218.1407 • Web Site: www.pdc-home.com

FOUNDATION / BASEMENT PLAN
CRAFTMARK HOMES / OAKMONT

DATE:	10/12/2005
REV. #14	06/05/2015
ACR #1081	06/10/2015
ACR #1083	06/02/2015
ACR #1086	01/26/2017

2.00

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 9438, EXPIRATION DATE 03/09/17



PART. PLAN W/OPT. 3-CAR SIDE-LOAD GAR.
 SCALE: 1/4" = 1'-0"
 (SHOWN W/ELEVATION #1-SEE ELEVATION FOR WINDOW HEADS AND MATERIALS)

PART. PLAN W/OPT. 2-CAR SIDE-LOAD GAR.
 SCALE: 1/4" = 1'-0"
 (SHOWN W/ELEVATION #1-SEE ELEVATION FOR WINDOW HEADS AND MATERIALS)

FIRST FLOOR PLAN
 SCALE: 1/4" = 1'-0"
 NOTE:
 1) REFERENCE PARTIAL PLANS FOR WINDOW AND DOOR SIZES AND LOCATIONS.
 2) REFERENCE TYPICAL WALL SECTION FOR ADDITIONAL INFORMATION.
 3) UNLESS OTHERWISE NOTED WINDOW HEAD HEIGHT SHALL BE 7'-4" ABOVE SUBFLOOR @ FRONT ELEVATION W/ELEV #1. SIDE & REAR WINDOWS AND ALL OTHER FRONT ELEV. TO BE 8'-0" ABOVE SUBFLOOR.
 4) UNLESS OTHERWISE NOTED ALL INTERIOR PARTITIONS SHALL BE 3-1/2"

NOTE:
 WINDOWS WHERE THE OPERABLE OPENING IS LOCATED MORE THAN 7'-2" ABOVE THE GRADE OR SURFACE BELOW SHALL HAVE THE LOWEST PART OF THE CLEAR OPENING A MINIMUM OF 24" (OR PER LOCAL CODE) ABOVE THE FINISHED FLOOR UNLESS EQUIPPED WITH AN APPROVED OPENING LIMITING OR FALL PREVENTION DEVICE.

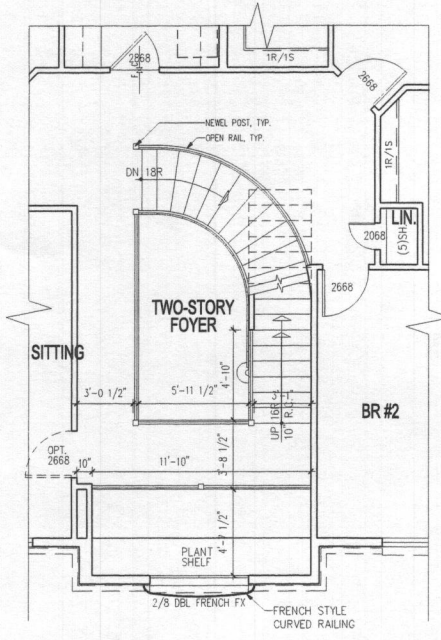
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 3) GLASS DOORS, SEE-LITES, & SHOWER ENCLOSURES TO BE SAFETY GLAZED.
 4) SMOKE DETECTORS ON EACH FLOOR LEVEL.
 5) ALL INTERIOR PARTITIONS 3 1/2" UNLESS NOTED OTHERWISE.

SHEET TITLE: **FIRST FLOOR PLAN**
 CLIENT INFORMATION: **CRAFTMARK HOMES / OAKMONT**
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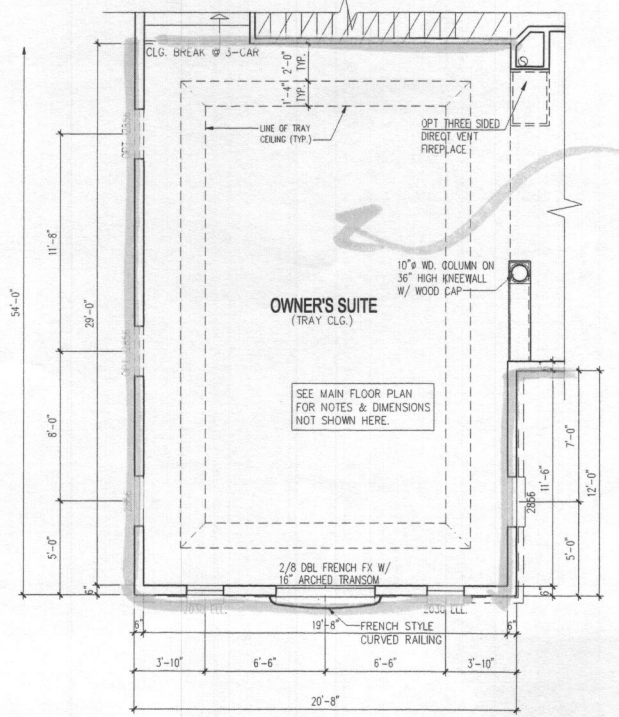
DRAWN BY: WSP	
10/01/2005	
REV. #	DATE
ACR #101	08/12/05
ACR #102	08/22/05
ACR #103	01/26/07
P2080300	
SHEET No.	

3-00

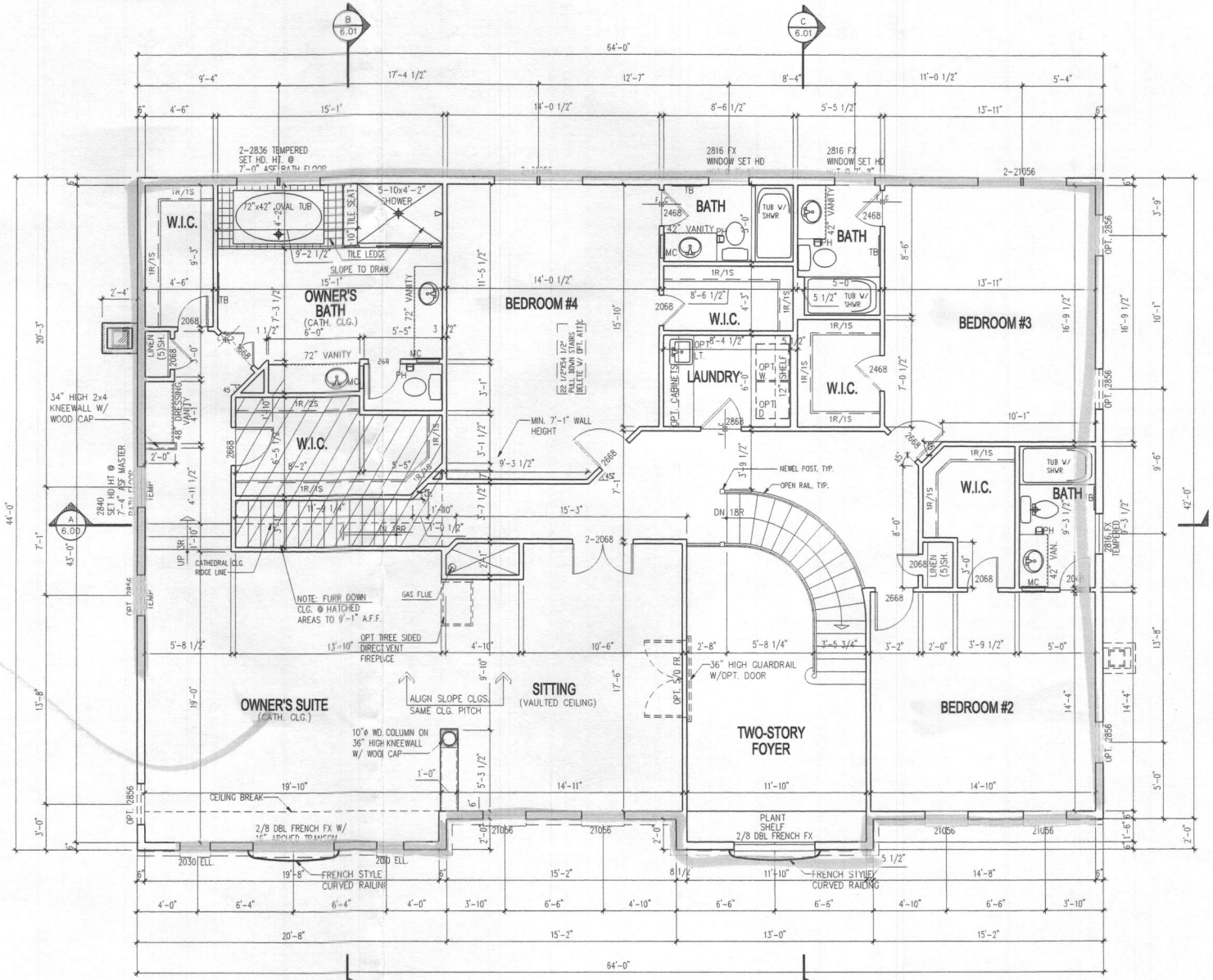
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PART. PLAN W/OPT. ATTIC
 SCALE: 1/4" = 1'-0"



**PART. PLAN W/OPT. 3
 CAR SIDE LOAD GARAGE**
 SCALE: 1/4" = 1'-0"



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

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NOTE:
 WASHING MACHINE WILL ALWAYS BE ON THE LEFT, DRYER WILL ALWAYS BE ON THE RIGHT EVEN IN THE REVERSE PLAN.

NOTE:
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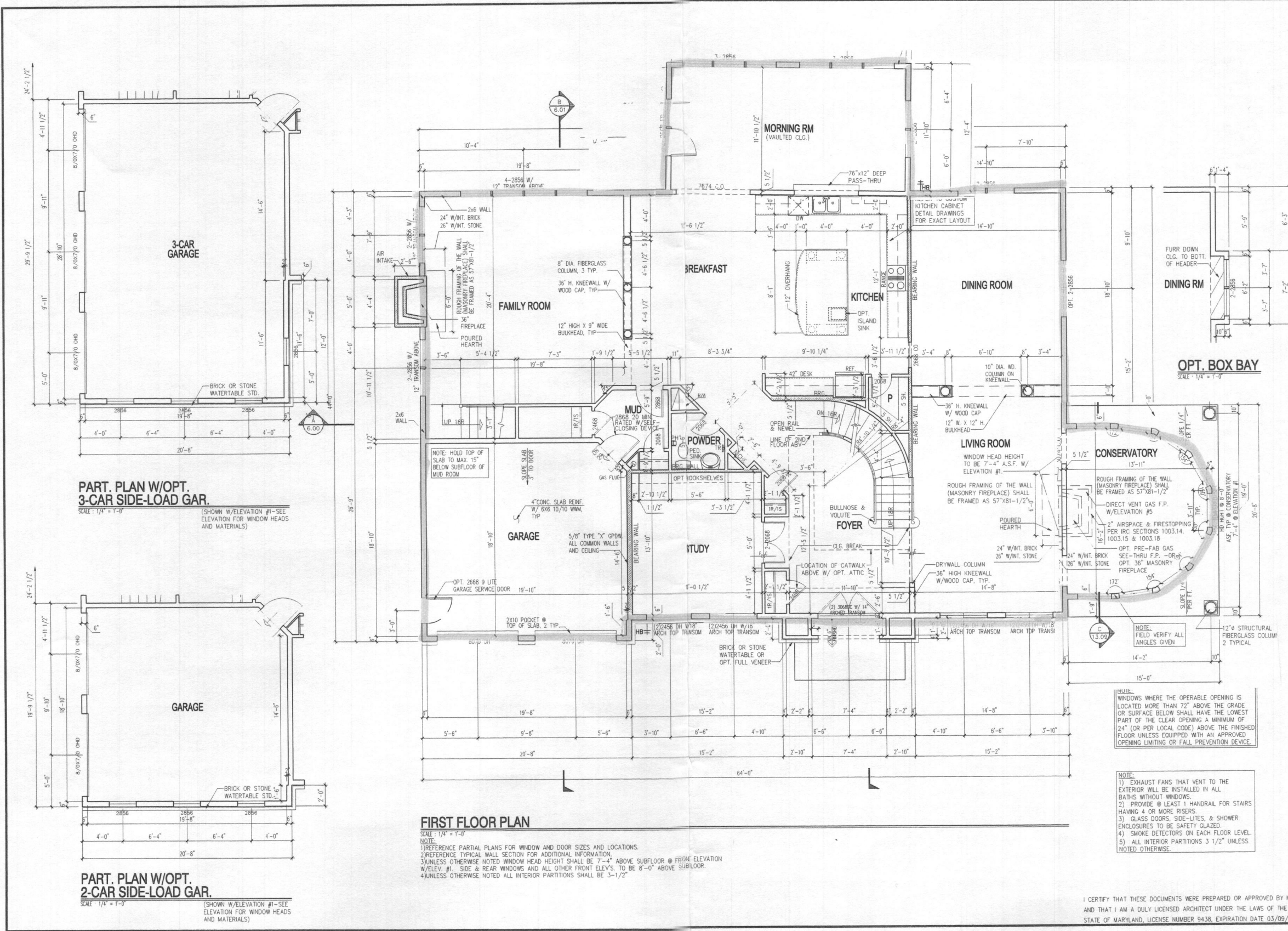
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SECOND FLOOR PLAN
CRAFTMARK HOMES / OAKMONT

DRAWN BY:	WSP
DATE:	10/12/2005
REV. #1	DATE
REV. #4	09/02/2015
ACR #1061	09/12/2015
ACR #1063	09/22/2015
ACR #1066	01/28/2017

2390301
 SHEET No.
3.01



PART. PLAN W/OPT. 3-CAR SIDE-LOAD GAR.
 SCALE: 1/4" = 1'-0"
 (SHOWN W/ELEVATION #1-SEE ELEVATION FOR WINDOW HEADS AND MATERIALS)

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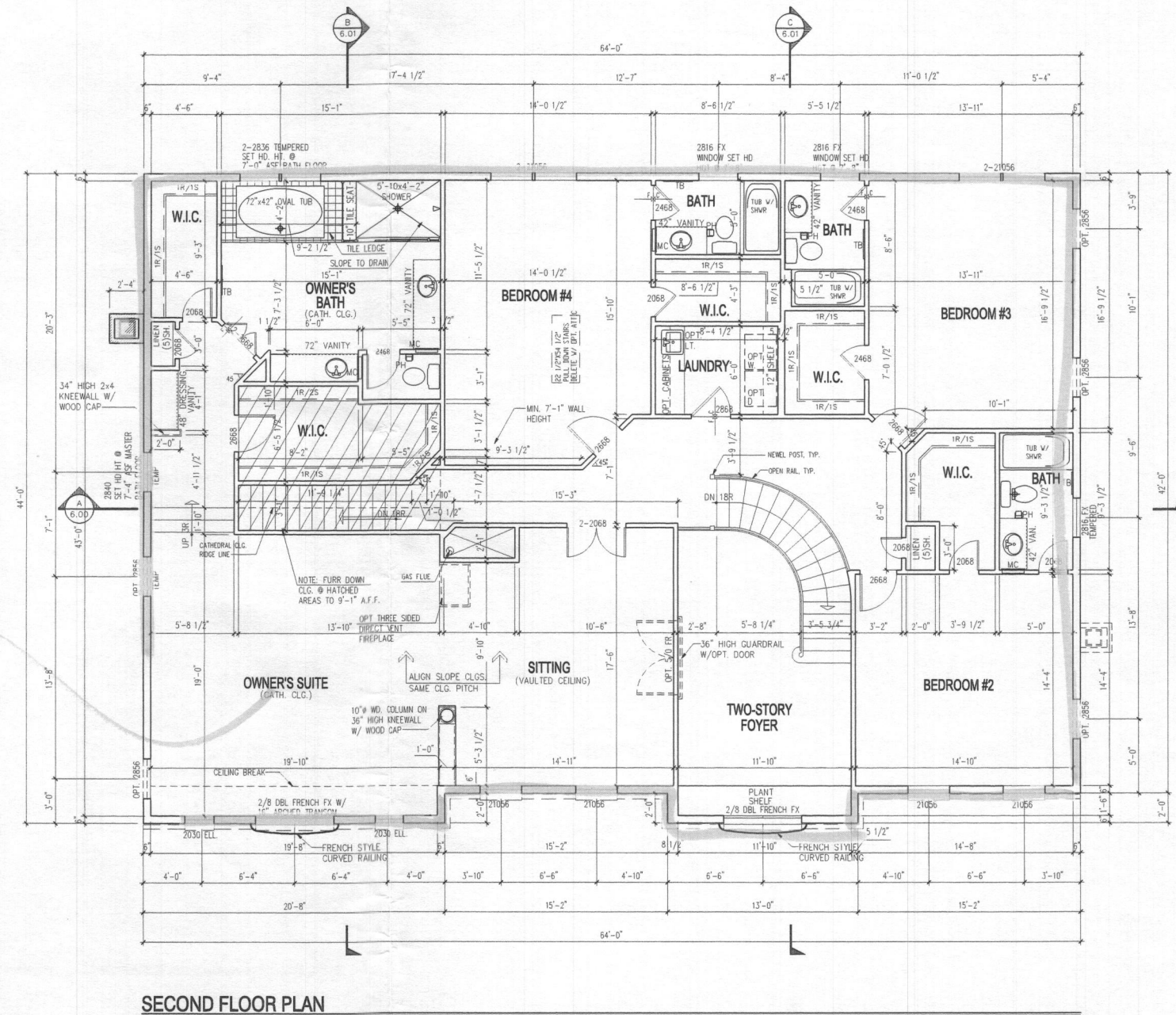
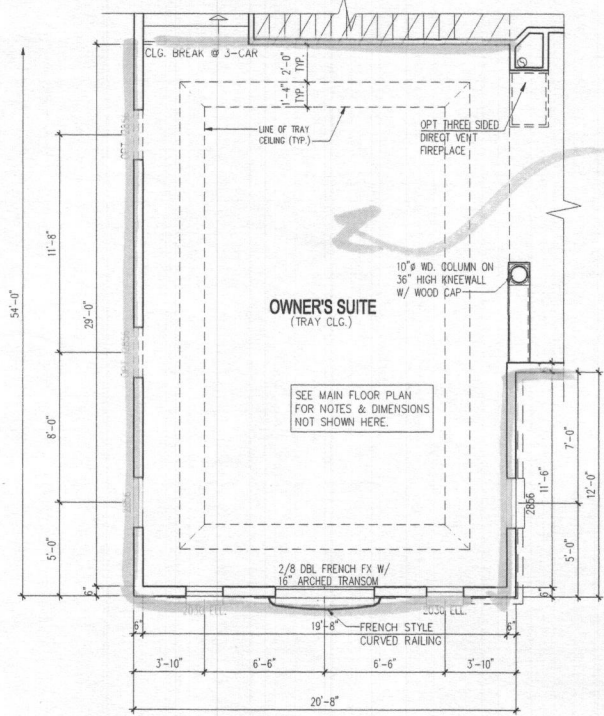
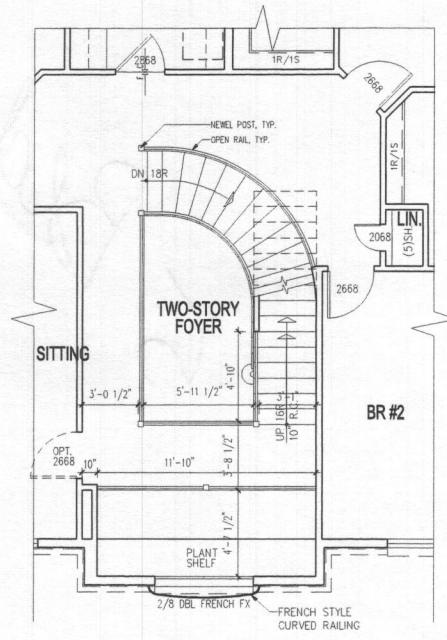
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FIRST FLOOR PLAN
 CLIENT INFORMATION:
CRAFTMARK HOMES / OAKMONT
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10/12/2005	
REV. #	DATE
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ACR #1061	08/12/2015
ACR #1063	08/22/2015
ACR #1066	01/28/2017

PS990330
 SHEET No.
3.00



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CRAFTMARK HOMES / OAKMONT
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09/02/2015	
01/26/2017	

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 10/01/2005
 P2009001
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B18000000