



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.: **B18000835**

Building Address: 1041 Fairlane Road
 City: Woodbine State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: GP-18-35
 Census Tract: _____ Subdivision: Fairlane Farms
 Section: _____ Area: _____ Lot: 19
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Vacant lot
 Proposed Use: single family home
 Estimated Construction Cost: \$ 230,000
 Description of Work: New 2 story "Cavanaugh" ELV 'B', with 2 car garage, 3' ext to Dinette, Bonus rm, covered porch, finished lower level (rec rm, bath rm)
 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 @ Decaturbuilding services . com

Contractor Company: NV Homes
 Contact Person: Cjrat Cagle
 Address: 9720 Patuxent Woods Drive
 City: Columbia State: MD Zip Code: 21046
 License No.: 56
 Phone: 410-379-5956 Fax: _____
 Email: ccagle @ NVR Inc . 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 <input type="checkbox"/> Slab on Grade |
| Construction type: | No. of Bedrooms: <u>4</u> |
| <input type="checkbox"/> Reinforced Concrete | Multi-family Dwelling |
| <input type="checkbox"/> Structural Steel | No. of efficiency units: |
| <input type="checkbox"/> Masonry | No. of 1 BR units: |
| <input type="checkbox"/> Wood Frame | No. of 2 BR units: |
| <input type="checkbox"/> State Certified Modular | 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 checked="" 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.

Applicant's Signature: Jim Kerwin
 Print Name: Jim Kerwin
 Email Address: Jim @ Decaturbuilding services . com
 Title/Company: AGENT NV Homes

RECEIVED
 MAR 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>4/5/18</u> | <u>H. O. [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 | \$ <u>100.00</u> |
| Permit Fee | \$ |
| Tech Fee | \$ |
| Excise Tax | \$ |
| PSFS | \$ |
| Guaranty Fund | \$ <u>50.00</u> |
| Add'l per Fee | \$ |
| Total Fees | \$ |
| Sub-Total Paid | \$ |
| Balance Due | \$ |
| Check # | <u>177014</u> |

[Handwritten initials]

HARDY ROAD

(30' R/W)
21' ASPHALT PAVING

790

S57°45'29"E

R=898.00'
A=13.78'

187.78'

790

GaC

PROP. 30'-15" HDPE @ 1.0%

INV. 780.5

INV. 780.20

FOREST ESMT #1
35959 S.F.
0.83 AC±

EX. / 20' DRAINAGE & UTILITY/EASEMENT
(PUBLIC) AS PER PLAT NO. 410513

GnD

LOT 25
130,680 s.f.
3.0000 AC±

GaC

LOT 24
WOODCAMP FARMS
PLAT NO. 23676
ANDREW & KRISTEN FARINA
EX. ZONING: RC-DEO

LOT 26
WOODCAMP FARMS
PLAT NO. 23676
THOMAS LOCKE & AMBER RYAN
EX. ZONING: RC-DEO

S28°06'35"W 624.57'

30' B.R.L.

2nd REPLACEMENT 2070'

1st REPLACEMENT 2078'

13-89
12-89
11-89

30' B.R.L.

N28°06'35"E 679.21'

DIST. BOX

8'-4" PVC @ 2.0%

1500 GAL SEPTIC TANK

EX. WELL
HO17 0008

PROP. HOUSE
F.F. 794.75
B. 786.00

EX. WELL
HO-17-0022 1,500 s.f.
WELL BOX

GgA

approved for UPT
B18000673
RAH 3/8/18

35' ENVIRONMENTAL-B.R.L.

FOREST ESMT #2
16117 S.F.
0.37AC±

LOT 4
CROWDER PROPERTY
PLAT NO. 6560
CHARLES KNILL, SR. & CHARLES KNILL, JR.
EX. ZONING: RC-DEO

212.00'
N42°53'26"W

1" = 50'

17741 Hardy Road



Health

Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

DILP 2018 MAY 4 AM 10:31

Date Received: _____

Permit No.: B18001525

Building Address: 1041 Fairlane Rd
 City: Woodbine State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Subdivision: Fairlane Farm
 Lot: 19 Tax Map: 8 Parcel: 8

Existing Use: SFD
 Proposed Use: SFD w/ Propane Tank
 Estimated Construction Cost: \$ 8000
 Description of Work:
Install 1000 gallon 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: _____

Property Owner's Name: Daisy Coop LLC
 Address: 2215 Duvall Rd
 City: Woodbine State: MD Zip Code: 21797
 Phone: 410-963-4457 Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Michelle Clancy
 Address: Po Box 370
 City: Perry Hall State: MD Zip Code: 21228
 Phone: 443-620-7574 Fax: _____
 Email: Michelle@AppliedAndApproved.com

Contractor Company: TECH AIR
 Contact Person: Dennis Feaga
 Address: 1560 A-D Caton Center Dr
 City: Baltimore State: MD Zip Code: 21227
 License No.: 81215
 Phone: 410-984-5631 Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: Contractor
 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 type="checkbox"/> Finished Basement | |
| Use group: | <input type="checkbox"/> Unfinished Basement | |
| | <input type="checkbox"/> Crawl Space | |
| | <input type="checkbox"/> Slab on Grade | |
| Construction type: | No. of Bedrooms: | |
| <input type="checkbox"/> Reinforced Concrete | Multi-family Dwelling | |
| <input type="checkbox"/> Structural Steel | No. of efficiency units: | |
| <input type="checkbox"/> Masonry | No. of 1 BR units: | |
| <input type="checkbox"/> Wood Frame | No. of 2 BR units: | |
| <input type="checkbox"/> State Certified Modular | No. of 3 BR units: | |
| | Other Structure: | |
| | Dimensions: | |
| | Footings: | |
| | Roof: | |
| | <input type="checkbox"/> State Certified Modular | |
| | <input type="checkbox"/> Manufactured Home | |

| 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 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.

Michelle Clancy
 Applicant's Signature
Michelle@AppliedAndApproved.com
 Email Address
Permits
 Title/Company

Michelle Clancy
 Print Name
5/3/18
 Date

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>5/15/18</u> | <u>R-KF</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>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>6377</u> |

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

1000

gal
Open Tank

STORMWATER MANAGEMENT NOTES:

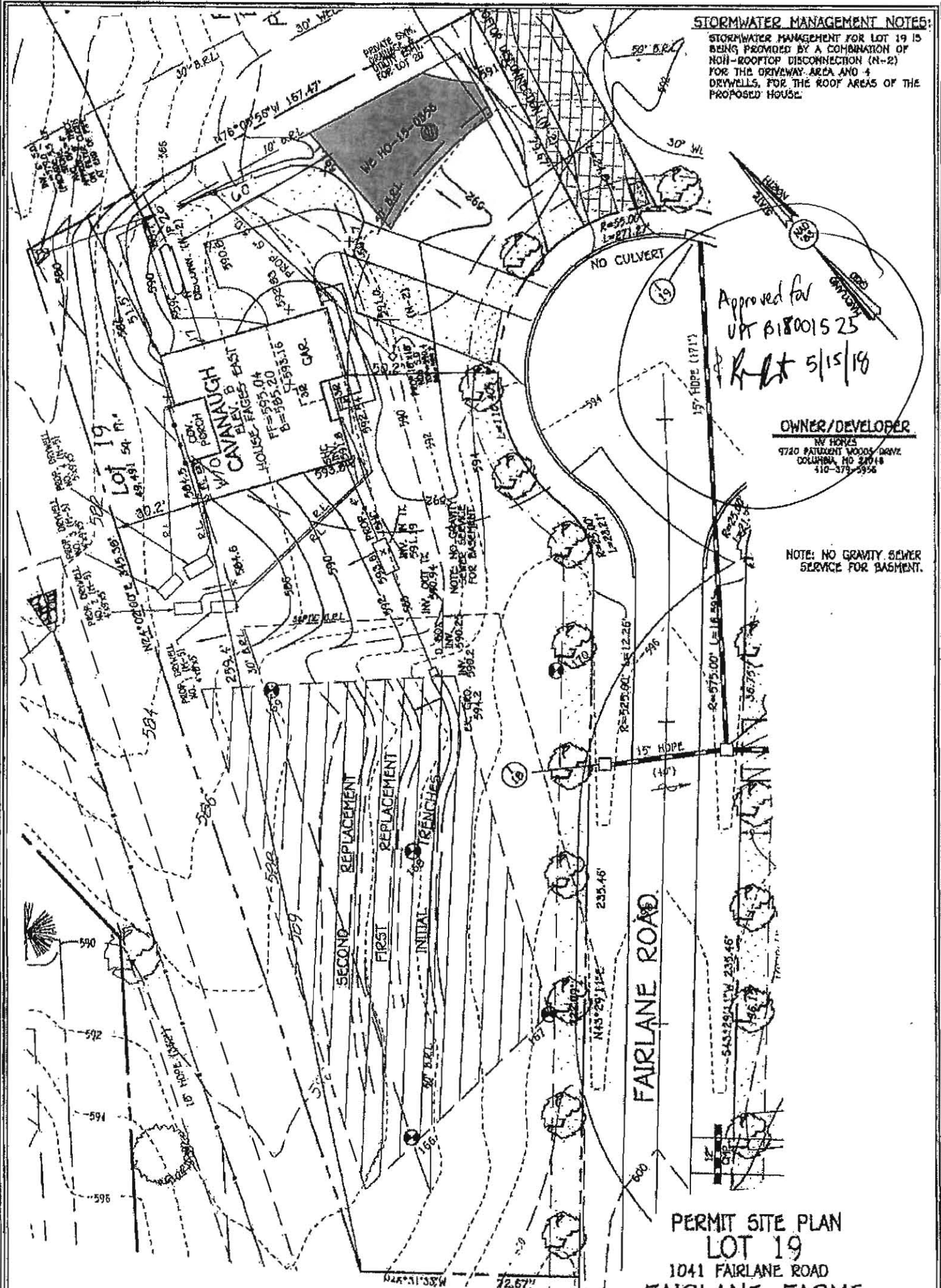
STORMWATER MANAGEMENT FOR LOT 19 IS BEING PROVIDED BY A COMBINATION OF NON-ROOFTOP DISCONNECTION (N-2) FOR THE DRIVEWAY AREA AND 4 DRYWELLS, FOR THE ROOF AREAS OF THE PROPOSED HOUSE.

Approved for
UPR B18001525
R-ht 5/15/18

OWNER/DEVELOPER

BY HERS
9720 PATUMENT WOODS DRIVE
COLUMBIA, MD 21048
410-379-2956

NOTE: NO GRAVITY SEWER SERVICE FOR BASMENT.



NOTE: THE EXISTING WELL SHOWN ON THIS PLAN, HO-15-0356, 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
18725 BAYVIEW NATIONAL PIKE
BLADENBORO, MARYLAND 21710
(410) 341-2000

PLAN

SCALE: 1" = 40'

**PERMIT SITE PLAN
LOT 19
1041 FAIRLANE ROAD
FAIRLANE FARMS**

PHASE TWO
ZONED: RC-DEO
TAX MAP NO.: 8 GRID NO.: 2 PARCEL NO.: 8
5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1" = 40' DATE: MARCH 1, 2018
SHEET 1 OF 1

Fairlane Farms
 Lot 19
 1041 Fairlane Road

CAVANAUGH

Health Dept

HEALTH DEPT

B18000835



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

| SPEC SHEET | FULL BASEMENT | | | | | | CRAWL SPACE | | | | | | ADDITIONAL ROOMS/PORCH | | | | | | STANDARD DETAILS | | | | |
|--|---------------|-----------|-----------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-----------|-----------|------------------------|---------------|--------------|---------------------|-------|----------------------------|------------------|--------------------|------------------------|-----------------------|-------|
| | STD. DWGS. | ELEV. 'A' | ELEV. 'B' | ELEV. 'K' | ELEV. 'L' | ELEV. 'M' | STD. DWGS. | ELEV. 'A' | ELEV. 'B' | ELEV. 'K' | ELEV. 'L' | ELEV. 'M' | EXTENSION TO DINETTE | COVERED PORCH | SITTING AREA | BEDROOM FIRST FLOOR | STUDY | B. CAR'S SIDE ENTRY GARAGE | | THREE BR. FOUR BR. | THREE BR. W/ BONUS RM. | FOUR BR. W/ BONUS RM. | |
| SPEC SHEET | 2 | | | | | | 2 | | | | | | | | | | | | | | | | D-1 |
| FRONT ELEVATIONS (SIDING) | | 3 | 5 | 7 | 8 | 9 | | 3 | 5 | 7 | 8 | 9 | | | | | | | | | | | D-2 |
| FRONT ELEVATIONS (BRICK) | | 4 | 6 | | | | | 4 | 6 | | | | | | | | | | | | | | D-4 |
| SIDE AND REAR ELEVATIONS | | 10 | 10 | 11 | 11 | 11 | | 10 | 10 | 11 | 11 | 11 | | | | | | | | | | | D-5 |
| FOUNDATION | 12 | | | | | | 12 | | | | | | | | | | | 15.3 | | | | | D-5a |
| FOUNDATION HOLD DOWN DETAIL | 16 | | | | | | 16 | | | | | | | | | | | | | | | | D-6 |
| PLUMBING | 18 | | | | | | 18 | | | | | | | | | | | | | | | | D-7 |
| BASEMENT PLAN | 20 | | | | | | 20 | | | | | | | | | | | | | | | | D-11 |
| FIRST FLOOR PLAN | 21 | | 22 | 22 | 22 | 22 | 21 | | 22 | 22 | 22 | 22 | | 23.1 | 23.1 | 23.1 | 23.1 | 23.2 | | | | | D-12 |
| SECOND FLOOR PLAN | | | 21.1 | 21.2 | 21.2 | 21.1 | | | 21.1 | 21.2 | 21.2 | 21.1 | | | | | | 23.2 | | 24 | 25 | 26 | D-12b |
| BUILDING SECTION AT FOYER | 28 | | | | | | 28 | | | | | | | | | | | | | | | | D-12c |
| BUILDING SECTION AT GARAGE | | | | | | | | | | | | | | | | | | 30.2 | | 24 | 30.1 | 30.1 | D-12d |
| STANDARD STAIR | 31.1 / 31.2 | | | | | | 31.1 / 31.2 | | | | | | | | | | | | | | | | D-13 |
| STANDARD STAIR - METAL BALUSTER | 32.1 / 32.2 | | | | | | 32.1 / 32.2 | | | | | | | | | | | | | | | | D-14 |
| UPGRADE STAIR | 33 | | | | | | 33 | | | | | | | | | | | | | | | | D-15a |
| UPGRADE STAIR - METAL BALUSTER | 34.1 / 34.2 | | | | | | 34.1 / 34.2 | | | | | | | | | | | | | | | | D-16 |
| STAIR RAIL | 35.1 / 35.2 | | | | | | 35.1 / 35.2 | | | | | | | | | | | | | | | | D-16a |
| KITCHEN PLANS - CABINET HOOD 'A' | 36 | | | | | | 36 | | | | | | | | | | | | | | | | D-17 |
| KITCHEN PLANS - CABINET HOOD 'B' | 37 | | | | | | 37 | | | | | | | | | | | | | | | | D-17a |
| KITCHEN PLANS - CABINET HOOD 'B' W/ OPT. OVEN | 38 | | | | | | 38 | | | | | | | | | | | | | | | | D-18c |
| KITCHEN PLANS - CABINET HOOD 'B' W/ GLS | 39 | | | | | | 39 | | | | | | | | | | | | | | | | D-20 |
| KITCHEN PLANS - CABINET HOOD 'B' W/ GLS AND OVEN | 40 | | | | | | 40 | | | | | | | | | | | | | | | | D-21 |
| NET BAR / LAUNDRY CABINET LAYOUT | 41 | | | | | | 41 | | | | | | | | | | | | | | | | D-22 |
| INTERIOR DETAIL | 42 | | | | | | 42 | | | | | | | | | | | | | | | | D-22a |
| EXTERIOR DETAILS | | 43 | 44 | 45 | 46 | 47 | | 43 | 44 | 45 | 46 | 47 | | | | | | | | | | | D-22b |
| BASEMENT ELECTRICAL | 48 | | | | | | 48 | | | | | | | | | | | | | | | | D-23 |
| FIRST FLOOR ELECTRICAL | 49 | | 50 | 50 | 50 | 50 | 49 | | 50 | 50 | 50 | 50 | | 51.1 | 51.1 | 51.1 | 51.1 | 51.2 | | | | | D-27 |
| SECOND FLOOR ELECTRICAL | | | 55.1 | 55.2 | 55.2 | 55.1 | | | 55.1 | 55.2 | 55.2 | 55.1 | | | | | | 51.2 | | 52 | 53 | 54 | D-29 |
| FIRST FLOOR JOIST LAYOUT | 56 | | | | | | 56 | | | | | | | | | | | | | | | | D-30 |
| SECOND FLOOR JOIST LAYOUT | 58 | | | | | | 58 | | | | | | | | | | | | | | | | D-31 |
| ROOF FRAMING | | 54 | 60 | 61 | 62 | 63 | | 54 | 60 | 61 | 62 | 63 | | 65 | 64 | | 59/61 | | 64 | 64 | 64 | D-34 | |
| TRUSS BRACING | 66 | | | | | | 66 | | | | | | | | | | | | | | | | D-36 |
| STRUCTURAL SHEATHING PLAN | 61/68 | | | | | | 61/68 | | | | | | | | | | | | | | | | D-37 |
| BASEMENT FLOOR HVAC LAYOUT | 72.1 / 72.2 | | | | | | 72.1 / 72.2 | | | | | | | | | | | | | | | | D-38a |
| CRAWL SPACE HVAC LAYOUT | | | | | | | | | | | | | | | | | | | | | | | D-38b |
| FIRST FLOOR HVAC LAYOUT | 74 | | | | | | 74 | | | | | | | | | | | | | | | | D-40 |
| SECOND FLOOR HVAC LAYOUT | 76 | | | | | | 76 | | | | | | | | | | | | | | | | D-44 |
| | | | | | | | | | | | | | | | | | | | | | | | D-45 |
| | | | | | | | | | | | | | | | | | | | | | | | D-46 |
| | | | | | | | | | | | | | | | | | | | | | | | WB-1 |
| | | | | | | | | | | | | | | | | | | | | | | | SP-1 |
| | | | | | | | | | | | | | | | | | | | | | | | SP-2 |
| | | | | | | | | | | | | | | | | | | | | | | | SP-3 |
| | | | | | | | | | | | | | | | | | | | | | | | SEP-1 |
| | | | | | | | | | | | | | | | | | | | | | | | SEP-2 |
| | | | | | | | | | | | | | | | | | | | | | | | SEP-3 |
| | | | | | | | | | | | | | | | | | | | | | | | SEP-4 |
| | | | | | | | | | | | | | | | | | | | | | | | F-1 |

BASE SQUARE FOOTAGE

| | | |
|--------------|---------------|------|
| FIRST FLOOR | GROSS SQ. FT. | 1876 |
| SECOND FLOOR | GROSS SQ. FT. | 706 |
| HOUSE TOTAL | GROSS SQ. FT. | 2582 |

ELEVATIONS SQ. FT.

| | | |
|---------------|---------------|-------|
| ELEVATION 'A' | GROSS SQ. FT. | +0 |
| ELEVATION 'B' | GROSS SQ. FT. | +6'9" |
| ELEVATION 'K' | GROSS SQ. FT. | +0 |
| ELEVATION 'L' | GROSS SQ. FT. | +15' |
| ELEVATION 'M' | GROSS SQ. FT. | +47' |

SECOND FLOOR SQ. FT.

| | | |
|-----------------------------|---------------|------|
| THREE BEDROOM W/ LOFT | GROSS SQ. FT. | +0 |
| FOUR BEDROOM | GROSS SQ. FT. | +0 |
| THREE BEDROOM W/ BONUS ROOM | GROSS SQ. FT. | +166 |
| FOUR BEDROOM W/ BONUS ROOM | GROSS SQ. FT. | +342 |

ADDITIONAL SQ. FT.

| | | |
|------------------|---------------|------|
| DINETTE EXTENDED | GROSS SQ. FT. | +42 |
| SITTING AREA | GROSS SQ. FT. | +119 |

MAXIMUM FINISHED SQ. FT.

| | | |
|---|---------------|------|
| HOUSE TOTAL | GROSS SQ. FT. | 3160 |
| **MAXIMUM SQ. FT. DOES NOT INCLUDE BASEMENT | | |

FINISHED BASEMENT SQ. FT.

| | | |
|------------------|---------------|------|
| RECREATION ROOM | GROSS SQ. FT. | 441 |
| W/ EXT. DINETTE | GROSS SQ. FT. | +42 |
| OPT. HOME OFFICE | GROSS SQ. FT. | +207 |
| W/ SITTING AREA | GROSS SQ. FT. | +119 |
| OPT. MEDIA ROOM | GROSS SQ. FT. | +321 |
| OPT. BATH ROOM | GROSS SQ. FT. | +88 |

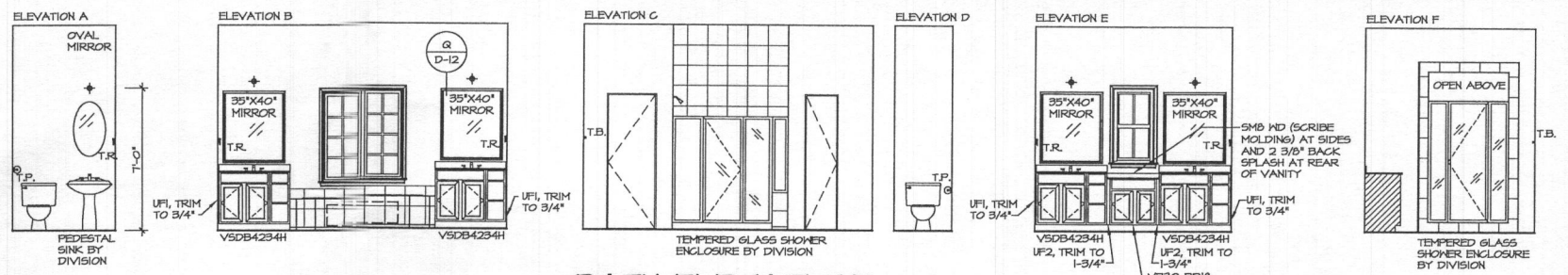
FOOTPRINT

| | |
|-------------|--------|
| BASE HOUSE: | |
| WIDTH: | 50'-0" |
| DEPTH: | 57'-0" |
| MAXIMUM: | |
| WIDTH: | 50'-8" |
| DEPTH: | 67'-4" |

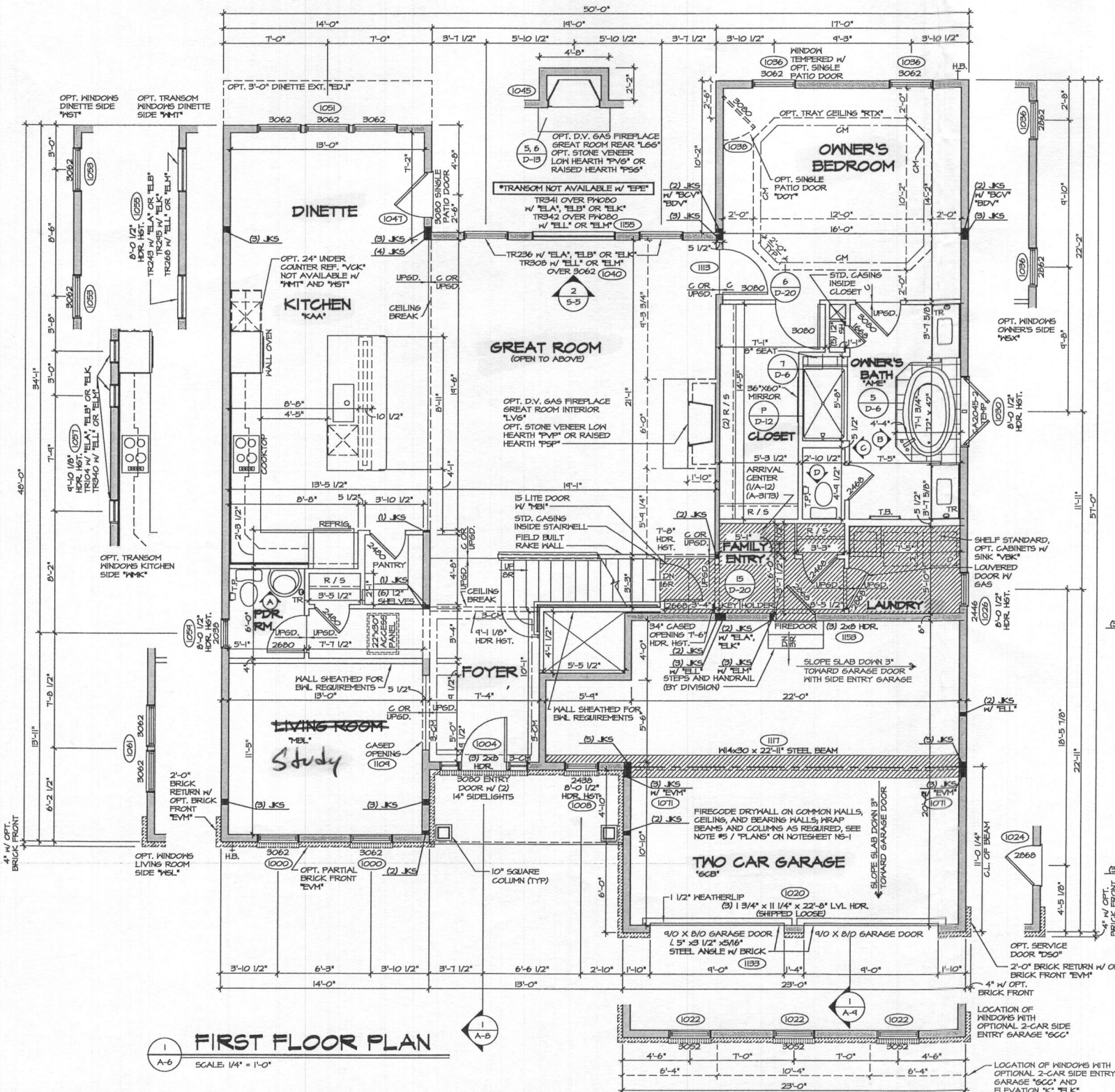
SET - VERSION
 11000-01 CS-1

4 BR'S
 1 potential BR in Basement

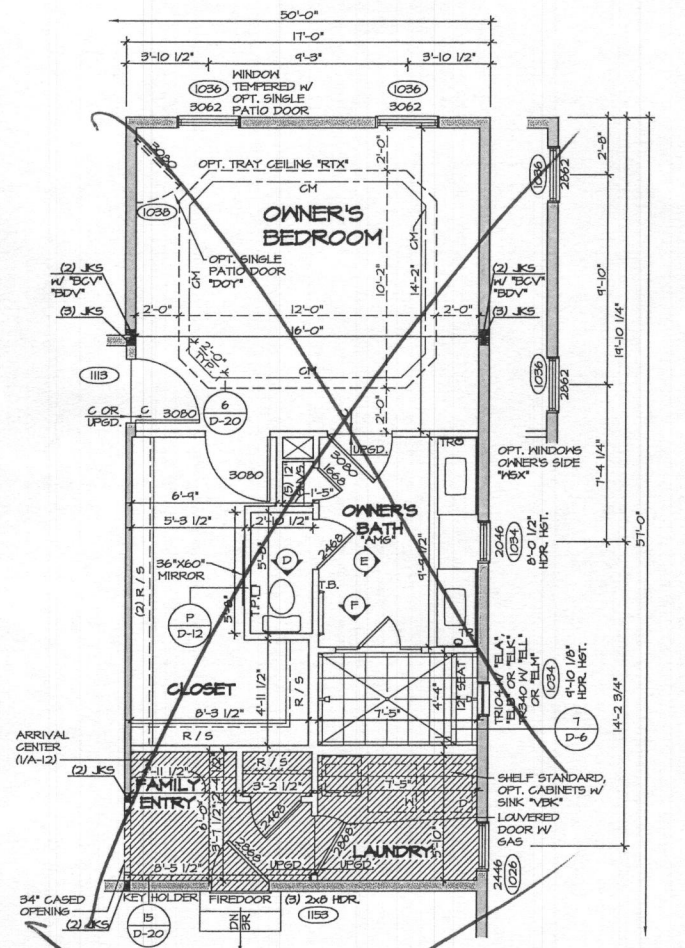
J:\DWG\ATTACHED\CAVANAUGH_11000_01\CS1.dwg 10/23/17 - 2:15 pm



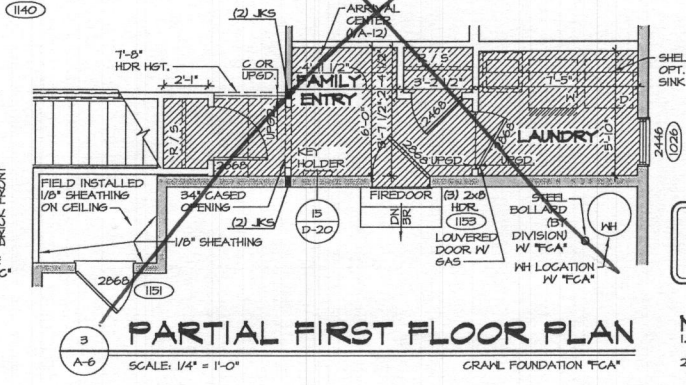
BATH ELEVATIONS
SCALE: 1/4" = 1'-0"



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



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



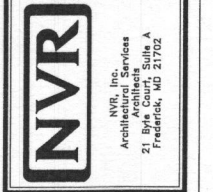
PARTIAL FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"

NOTE:
SEE SHEET 5-5 FOR BRACED WALL PANEL LOCATIONS

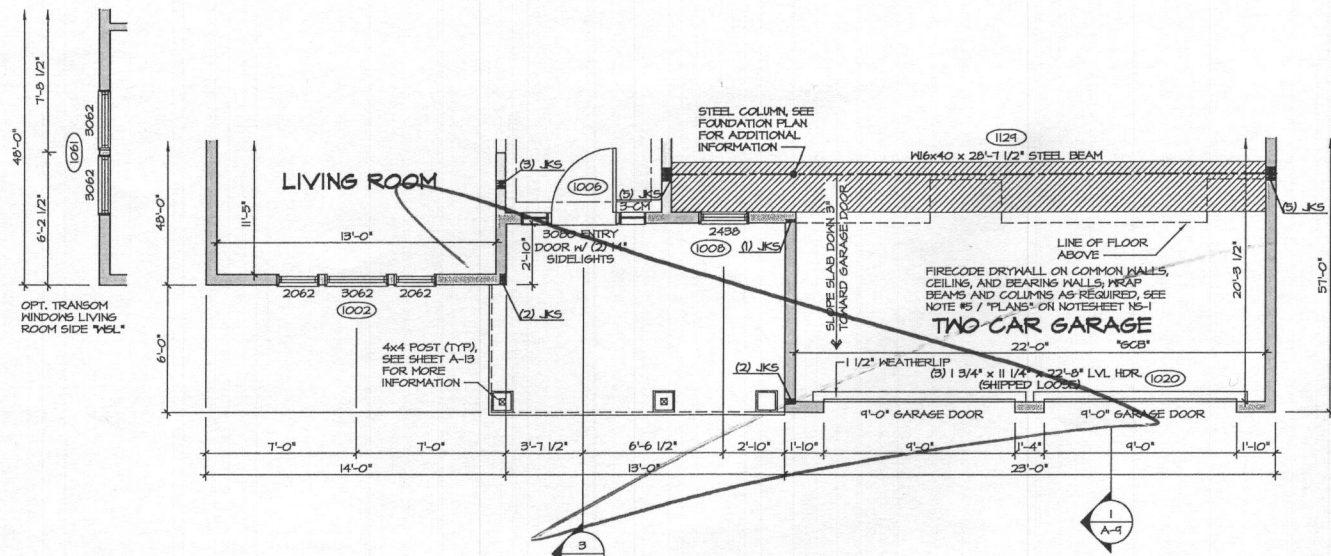
- NOTES:**
1. ALL HEADERS ARE (B) 2x6, UNLESS OTHERWISE NOTED.
 2. ALL EXTERIOR WALLS ARE 6" UNLESS OTHERWISE NOTED.
 3. ALL INTERIOR WALLS ARE 3 1/2" UNLESS OTHERWISE NOTED.
 4. HATCHED AREAS INDICATE DROPPED CEILINGS.
 5. ALL CASING OPENINGS AT 0'-0", UNLESS OTHERWISE NOTED.
 6. WASHER ALWAYS ON THE LEFT PER PLAN OR REVERSE PLAN.

REMARKS

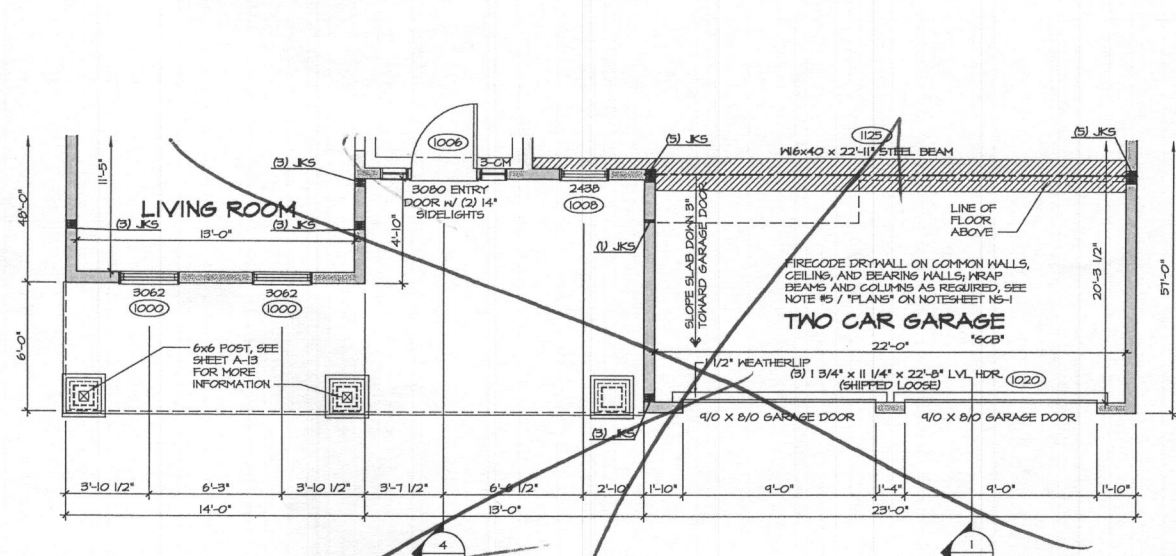
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|----------|---------|--------------------|
| 1 | 10/1/00 | ISSUED FOR PERMITS |
| 2 | 10/1/00 | ISSUED FOR PERMITS |
| 3 | 10/1/00 | ISSUED FOR PERMITS |
| 4 | 10/1/00 | ISSUED FOR PERMITS |
| 5 | 10/1/00 | ISSUED FOR PERMITS |
| 6 | 10/1/00 | ISSUED FOR PERMITS |
| 7 | 10/1/00 | ISSUED FOR PERMITS |
| 8 | 10/1/00 | ISSUED FOR PERMITS |
| 9 | 10/1/00 | ISSUED FOR PERMITS |
| 10 | 10/1/00 | ISSUED FOR PERMITS |



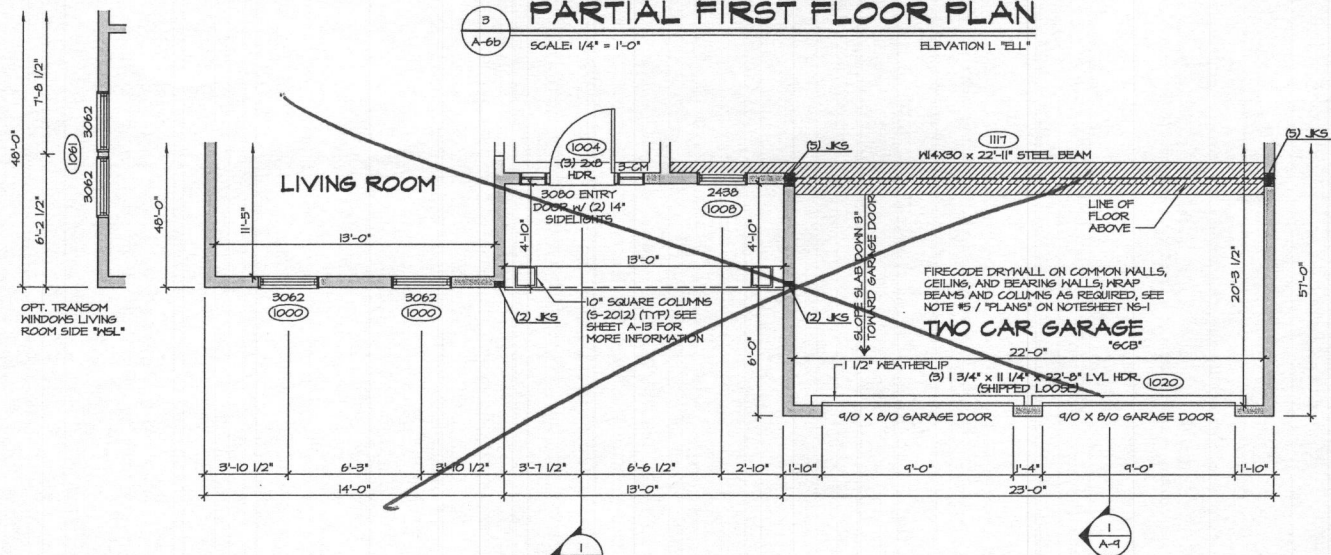
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|--------------------------------|--------------|
| SET NO. 11000 | VERSION 01 |
| DRAWN BY JEG | DATE 4/10/03 |
| OPTION | |
| MODEL CAVANAUGH | |
| DRAWING TITLE FIRST FLOOR PLAN | |
| SHEET NO. A-6 | 21 |



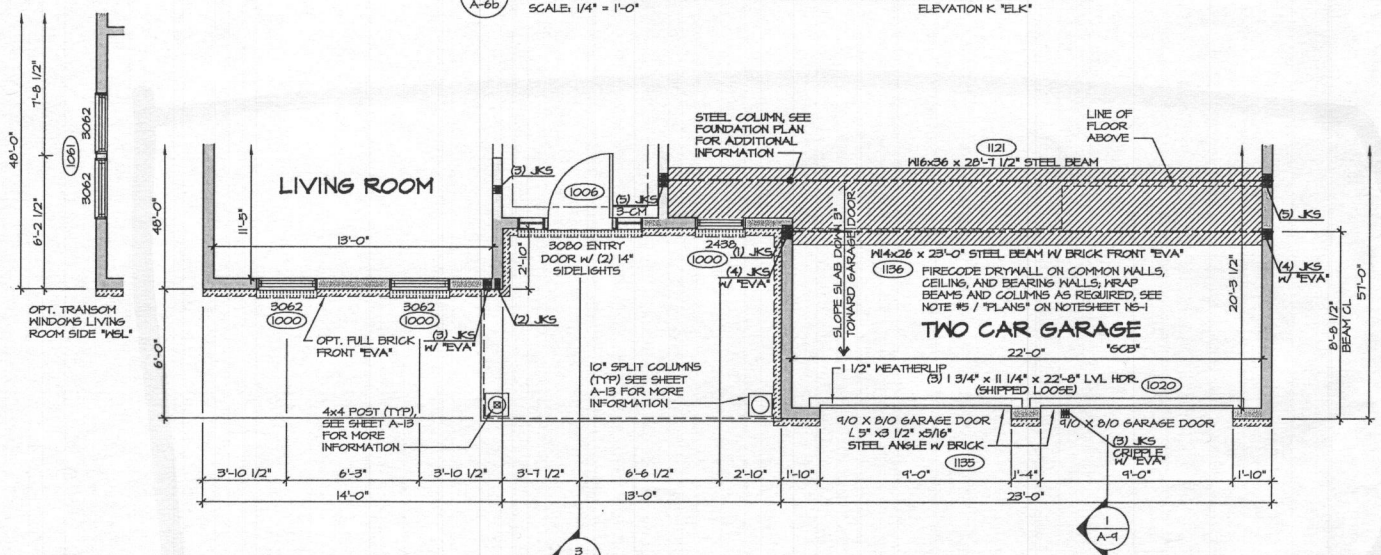
3 PARTIAL FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
ELEVATION L "ELL"



4 PARTIAL FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
ELEVATION M "ELM"



2 PARTIAL FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
ELEVATION K "ELK"



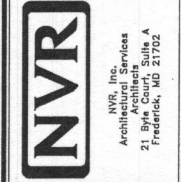
1 PARTIAL FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
ELEVATION B "ELB"

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

- NOTES:**
1. ALL HEADERS ARE (3) 2x6, UNLESS OTHERWISE NOTED.
 2. ALL EXTERIOR WALLS ARE 6" UNLESS OTHERWISE NOTED.
 3. ALL INTERIOR WALLS ARE 3 1/2" UNLESS OTHERWISE NOTED.
 4. HATCHED AREAS INDICATE DROPPED CEILING.
 5. ALL CASED OPENINGS AT 8'-3", UNLESS OTHERWISE NOTED.
 6. WASHER ALWAYS ON THE LEFT PER PLAN OR REVERSE PLAN.

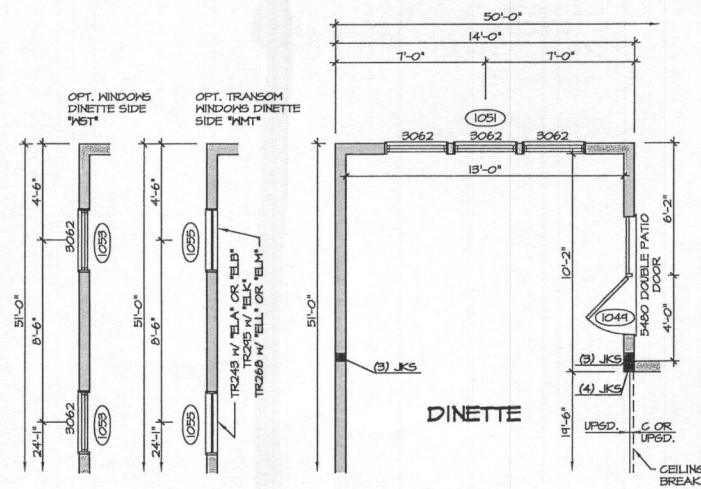
| REV. NO. | DATE | DESCRIPTION |
|----------|---------|--|
| 1 | 8/14/14 | ISS - REVISED BEAM SIZE ON DETAIL (A-6b) |
| 2 | 2/29/15 | LEA - REVISED ELB FOR COL. (PAR 3112) |
| 3 | 8/10/15 | LEA - ADDED CL. PERMITS TO BLK BRICK SUPPORT BEAM (PAR 3163) |
| 4 | 8/10/15 | CL.5 - SHIPPED CL. PERMITS IN FRONT LIVING RM. 1" TOWARD E.A. OTHER (PAR 3163) |
| 5 | 5/4/17 | 589 - PAR 485-6 - REVISED TONGUE POSTS / BEAM / TRUSSED PATH ELM |

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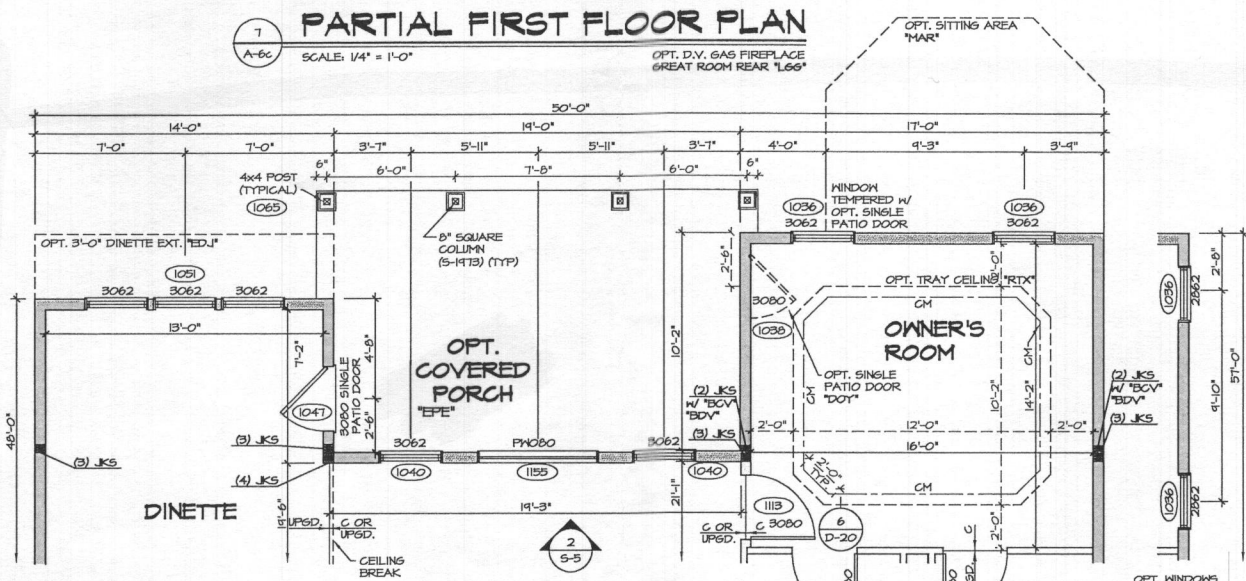


| | |
|---------------|--|
| SET NO. 11000 | VERSION 01 |
| DRAWN BY JEG | DATE: 4/12/2015 |
| OPTION | ELEVATION "B", ELEVATION "K", ELEVATION "L", ELEVATION "M" |

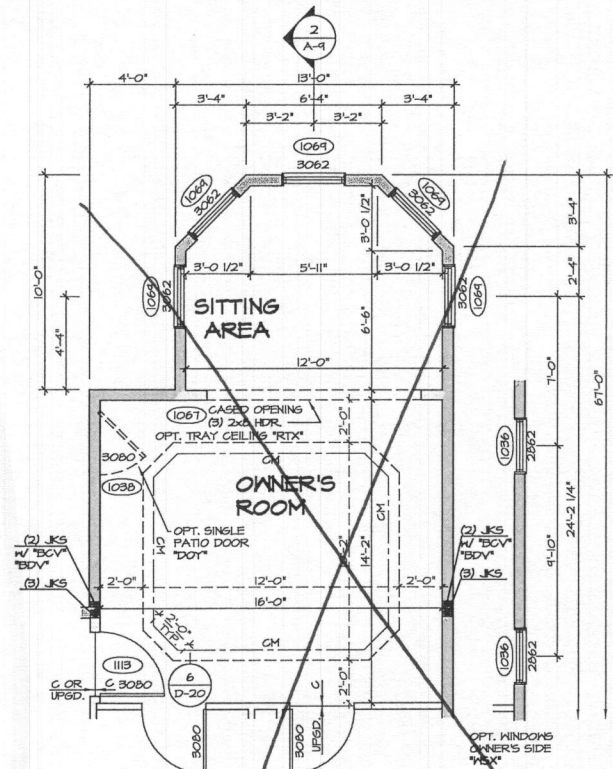
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|------------------|--|
| MODEL: CAYANAUGH | DRAWING TITLE: PARTIAL FIRST FLOOR PLAN |
| SHEET NO. A-6b | OPTION DESCRIPTION: ELEVATION "B", ELEVATION "K", ELEVATION "L", ELEVATION "M" |
| 22 | |



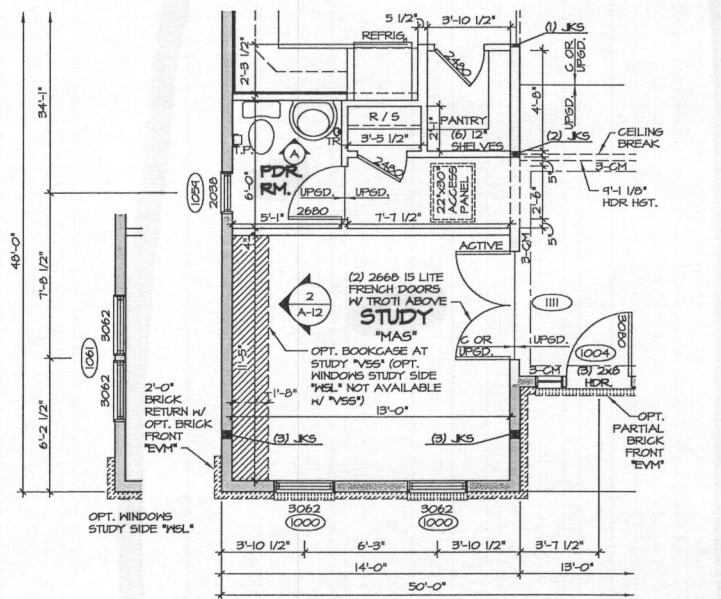
1 PARTIAL FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
OPT. 3'-0" EXTENSION TO DINETTE 'EDJ'



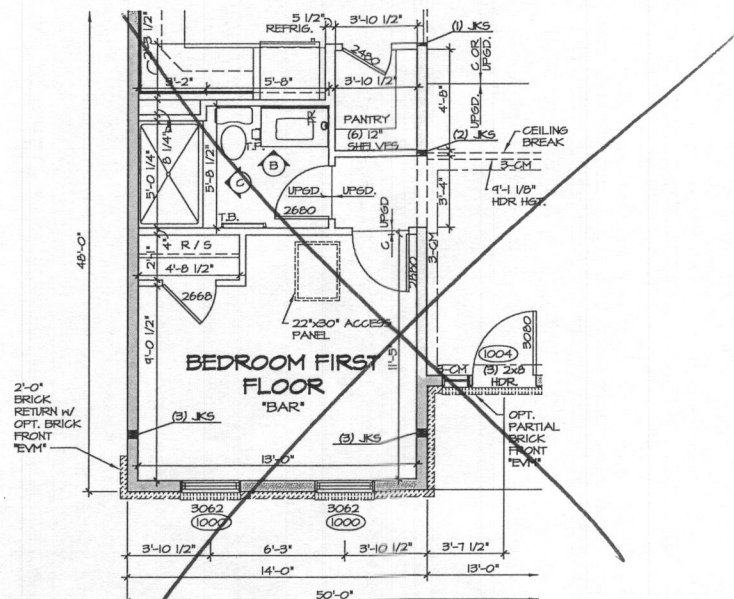
2 PARTIAL FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
OPT. COVERED PORCH 'EFE'



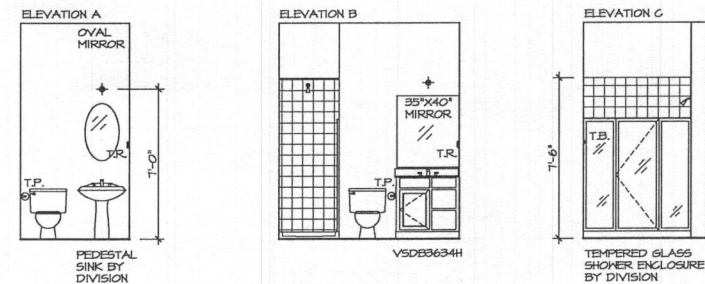
3 PARTIAL FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
OPT. SITTING AREA 'MAR'



4 PARTIAL FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
OPT. STUDY 'MAS' SHOWN AS 'ELA'



5 PARTIAL FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
OPT. BEDROOM FIRST FLOOR 'BAR' SHOWN AS 'ELA'



6 BATH ELEVATIONS
SCALE: 1/4" = 1'-0"

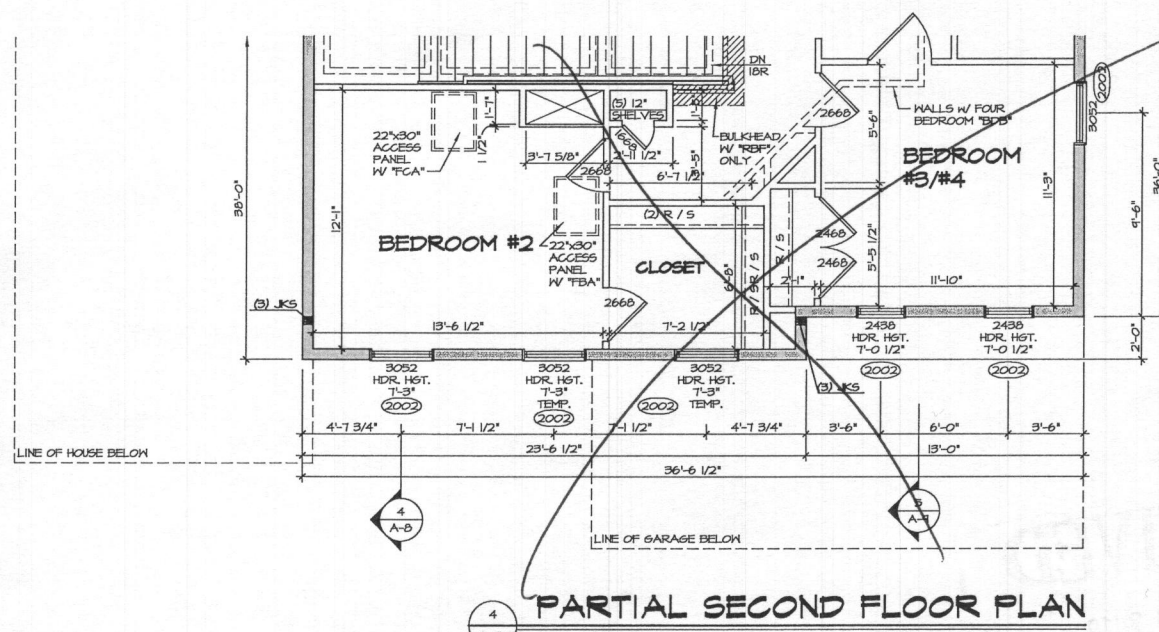
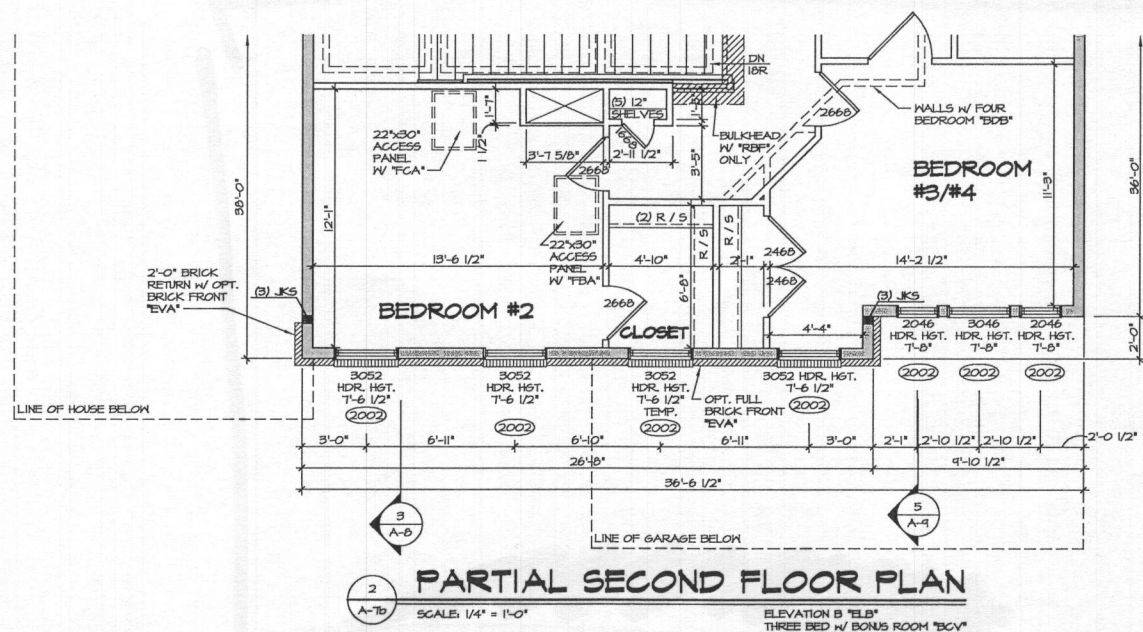
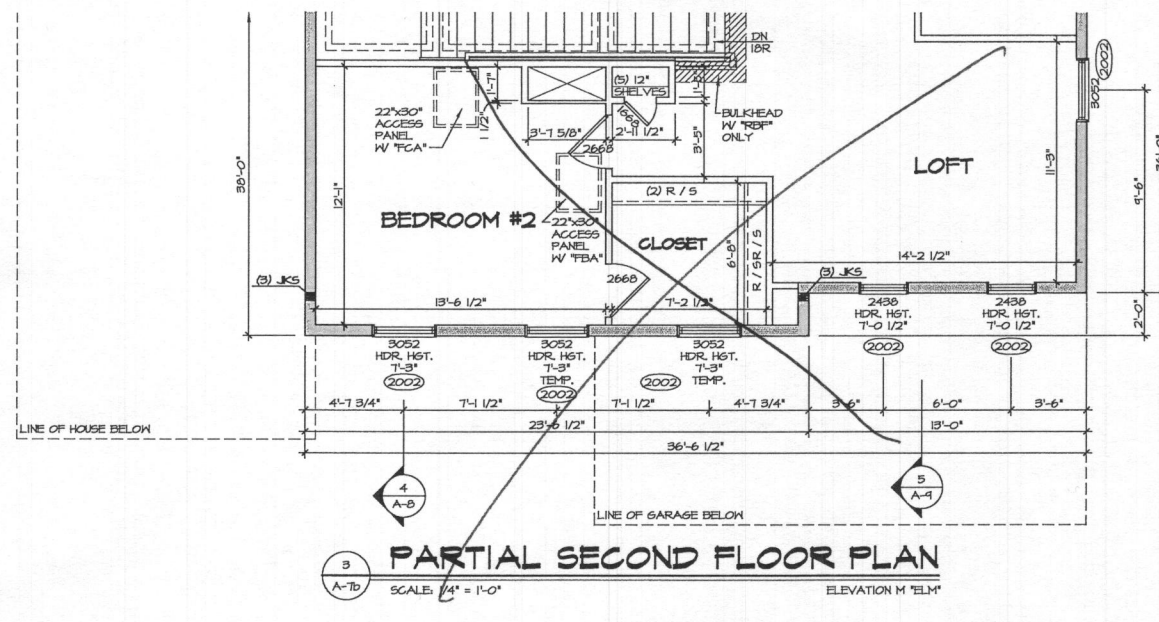
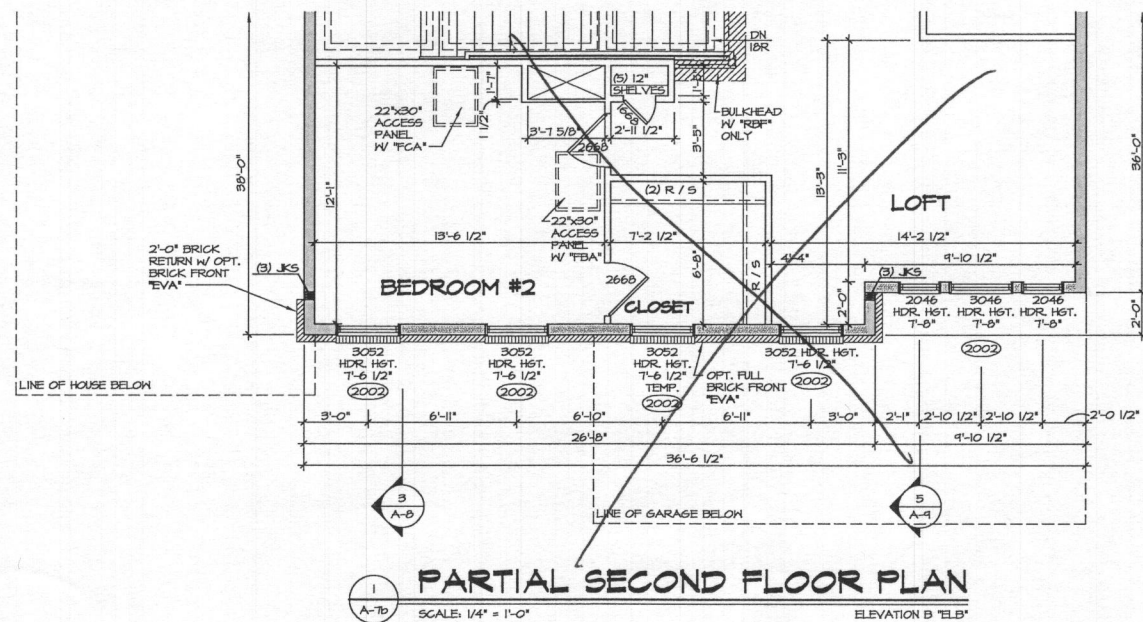
NOTE:
SEE SHEET 5-5 FOR BRACED WALL PANEL LOCATIONS

- NOTES:
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 5. ALL CASING OPENINGS AT 8'-3", UNLESS OTHERWISE NOTED.
 6. WASHER ALWAYS ON THE LEFT PER PLAN OR REVERSE PLAN.

| REV. NO. | DATE | REMARKS |
|----------|---------|--|
| 1 | 4/25/14 | TES - FRAXIS TIB CONVERSIONS |
| 2 | 6/27/14 | SEA - REVISED BEDROOM FIRST FLOOR VANITY HEIGHT |
| 3 | 6/22/14 | ELB - ADDED SHELVING TO RIGHT SIDE OF PANTRY (PANSB4-2) |
| 4 | 2/27/15 | DDB - ADIT REVISIONS |
| 5 | 6/27/15 | NLC - REVISED STUDY DOOR SIZE PAR # 3829 |
| 6 | 3/31/16 | GLS - SHIFTED HINDOWS IN FRONT LIVING RM. L. TONARDS EA. OTHER (PANS 3880) |
| 7 | 3/31/17 | SKB - ADDED NY DIAMOND FEATURES (DDB # 650) |

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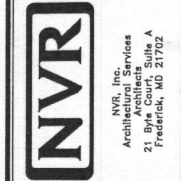
| | | | | | | |
|-------------------|-----------|---------|---------|----------|-----------|---|
| SHEET NO. | MODEL | SET NO. | VERSION | DRAWN BY | DATE | OPTION |
| A-6c | CAYANAUGH | 1000 | 01 | JEG | 9/11/2018 | EXTENSION TO DINETTE, COVERED PORCH, SITTING AREA, STUDY, BEDROOM FIRST FLOOR |
| DRAWING TITLE | | | | | | PARTIAL FIRST FLOOR PLAN |
| SHEET DESCRIPTION | | | | | | 23.1 |



- NOTES:**
1. ALL HEADERS ARE (3) 2x6, UNLESS OTHERWISE NOTED.
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 3. HATCHED AREAS INDICATE DROPPED CEILING.
 4. ALL CASING OPENINGS AT T-11", UNLESS OTHERWISE NOTED.
 5. WASHER ALWAYS ON THE LEFT PER PLAN OR REVERSE PLAN.

| REV. NO. | DATE | REMARKS |
|----------|---------|--|
| 1 | 4/24/14 | BD1 - ADDED ACCESS DOOR TO ABOVE GARAGE WITH ELEVATION "C" |
| 2 | 6/14/14 | EL5 - ADJUSTED WINDOW LOCATION AT LOFT (PARTIAL) |
| 3 | 6/14/14 | GL5 - REV. CLOSET ELEV. 'B' ADD A 3052 KINDER IN BEDROOM #3/4 (24622) |
| 4 | 6/14/14 | J25 - REVISED TEMPERED WINDOW DTL. 2A-7B |
| 5 | 6/14/14 | J25 - ADD REVISIONS |
| 6 | 6/14/14 | BD1 - REVISED WINDOW IN BDRM. #2 CLOSET TO TEMP. W/ ELEV. "C" (PAR 2194) |
| 7 | 6/14/14 | BD1 - ADD REVISIONS |
| 8 | 2/22/16 | 5P4 - ADDED A.C. LOC. ATTIC ACCESS IN BDRM. # 2 PAR 2194 |

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| | |
|---------------|-----------------|
| SET NO. 11000 | VERSION 01 |
| DRAWN BY JEG | DATE: 4/16/2013 |
| OPTION | ELEV. 'ELB' |

| | | |
|----------------|----------------------|--|
| SHEET NO. A-7b | MODEL CAVANAUGH | DESCRIPTION PARTIAL SECOND FLOOR PLANS |
| 27.1 | OPTION ELEVATION "M" | |