



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: 10/22/19

Permit No.: B1900 3570

Building Address: 11525 Crows Nest Road
 City: Clarksville State: MD Zip Code: 21029
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Subdivision: 2002
 Lot: Part D Tax Map: 0041 Parcel: 0394

Existing Use: wood deck
 Proposed Use: Sunroom
 Estimated Construction Cost: \$ 23,459
 Description of Work: Enclose under existing wood roof + on existing wood deck to create sunroom 11' x 12' x 9' high
 Occupant/Tenant Name: Homeowner - Nancy Payne
 Was tenant space previously occupied? Yes No
 Contact Name: Whitney Gischel
 Address: 501 McCormick Dr. #E
 City: Glen Burnie State: MD Zip Code: 21061
 Phone: 410 760 1919 Fax: _____
 Email: Whitney.Gischel@GreatDayImprovements.com

Property Owner's Name: Nancy Payne
 Address: 11525 Crows Nest Road
 City: Clarksville State: MD Zip Code: 21029
 Phone: 410 531 5983 Fax: _____
 Email: cnk2@yahoo.com

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Whitney Gischel
 Address: 501 McCormick Dr #E
 City: Glen Burnie State: MD Zip Code: 21061
 Phone: 410 760 1919 Fax: _____
 Email: Whitney.Gischel@GreatDayImprovements.com

Contractor Company: Great Day Improvements
 Contact Person: Whitney Gischel
 Address: 501 McCormick Dr #E
 City: Glen Burnie State: MD Zip Code: 21061
 License No.: 132308
 Phone: 410 760 1919 Fax: _____
 Email: Whitney.Gischel@GreatDayImprovements.com

Engineer/Architect Company: James Clancy
 Responsible Design Prof.: _____
 Address: 601 Ashbury Ave.
 City: National Park State: NJ Zip Code: 08063
 Phone: 856-853-7306 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
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
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input 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 checked="" 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: Whitney Gischel
 Print Name: Whitney Gischel
 Email Address: Whitney.Gischel@greatdayimprovements.com
 Date: 10/21/2019
 Title/Company: Permit Control

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

RECEIVED
OCT 22 2019
LICENSES & PERMITS DIVISION

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>11/8/19</u>	<u>Paula...</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>25.00</u>
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

Approved 11/8/2019 RVE

B19003570

HOWARD COUNTY



GREAT DAY IMPROVEMENTS, BALTIMORE
PAYNE RESIDENCE

MINIMUM DESIGN LOADS: (PER 2018 IRC)

SUNROOM CATEGORY II (PER 2018 IRC R301.2.1.1.1 & AAMA / NPEA / NSA 2100))

SNOW LOADS:

1. GROUND SNOW LOAD 30 PSF

ULTIMATE DESIGN WIND SPEED: 115 MPH, 3 SEC. GUSTS

LIVE LOADS:

- 1. ROOF: 40 PSF
- 2. FLOOR: 40 PSF

NOTE: THIS ENCLOSURE IS NOT TO BE CONDITIONED OR USED AS A PERMANENT LIVING AREA.

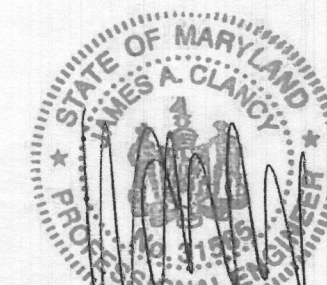
NOTES:

- 1. ALLVIEW (AVR) ROOM; SANDSTONE IN COLOR
- 2. CONSTRUCT ENCLOSURE ON EXISTING DECK AND UNDER EXISTING ROOF
- 3. NO HEAT BY GDI, ELECTRICAL BY GDI
- 4. ROOM CONSIDERED AS NON-CONDITIONED SPACE, EXEMPT FROM ENERGY EFFICIENCY REQUIREMENTS (PER 2018 IRC SECTION N1102.1, NOTE 2)

NOTE: THE P.E. STAMP ON THESE DRAWINGS ADDRESS ONLY THE GDI MANUFACTURED COMPONENTS, & THE ANCHORAGE OF THESE COMPONENTS TO THE EXISTING STRUCTURE.

DRAWING #	DESCRIPTION
1	COVER
2	ELEVATION "B" WALL
3	ELEVATION "A" & "C" WALL
4	FLOOR PLAN
5	SYSTEM DETAILS
6	SYSTEM DETAILS

PROFESSIONAL CERTIFICATION. I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 31585, EXPIRATION DATE: 7/18/21."



10-15-19

JAMES A. CLANCY P.E., L.S.
 MD PROFESSIONAL ENGINEER (MD LIC. # 31585)
 601 ASBURY AVENUE
 NATIONAL PARK, NJ. 08063
 PH. # 856-853-7306

REV. A	10/11/19
DATE	10/4/19
DRAWN	ZMS
SCALE	1/4" = 1'-0"
SHEET	1 OF 5

LOCATION
 GDI - BALTIMORE
 501 McCORMICK DRIVE, SUITES D-F
 GLEN BURNIE, MD 21061
 410-760-1919

NANCY PAYNE
 11525 CROWS NEST ROAD
 CLARKSVILLE, MD. 21029
 JOB # 40639

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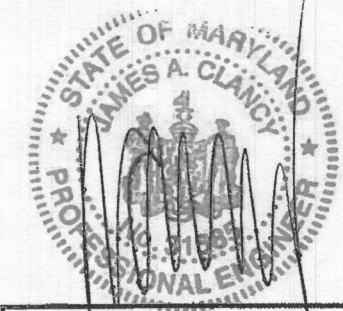


ELEVATION - "B" WALL
(RAILINGS NOT SHOWN FOR CLARITY)



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SCALE	1/8" = 1'-0"
SHEET	2 OF 5

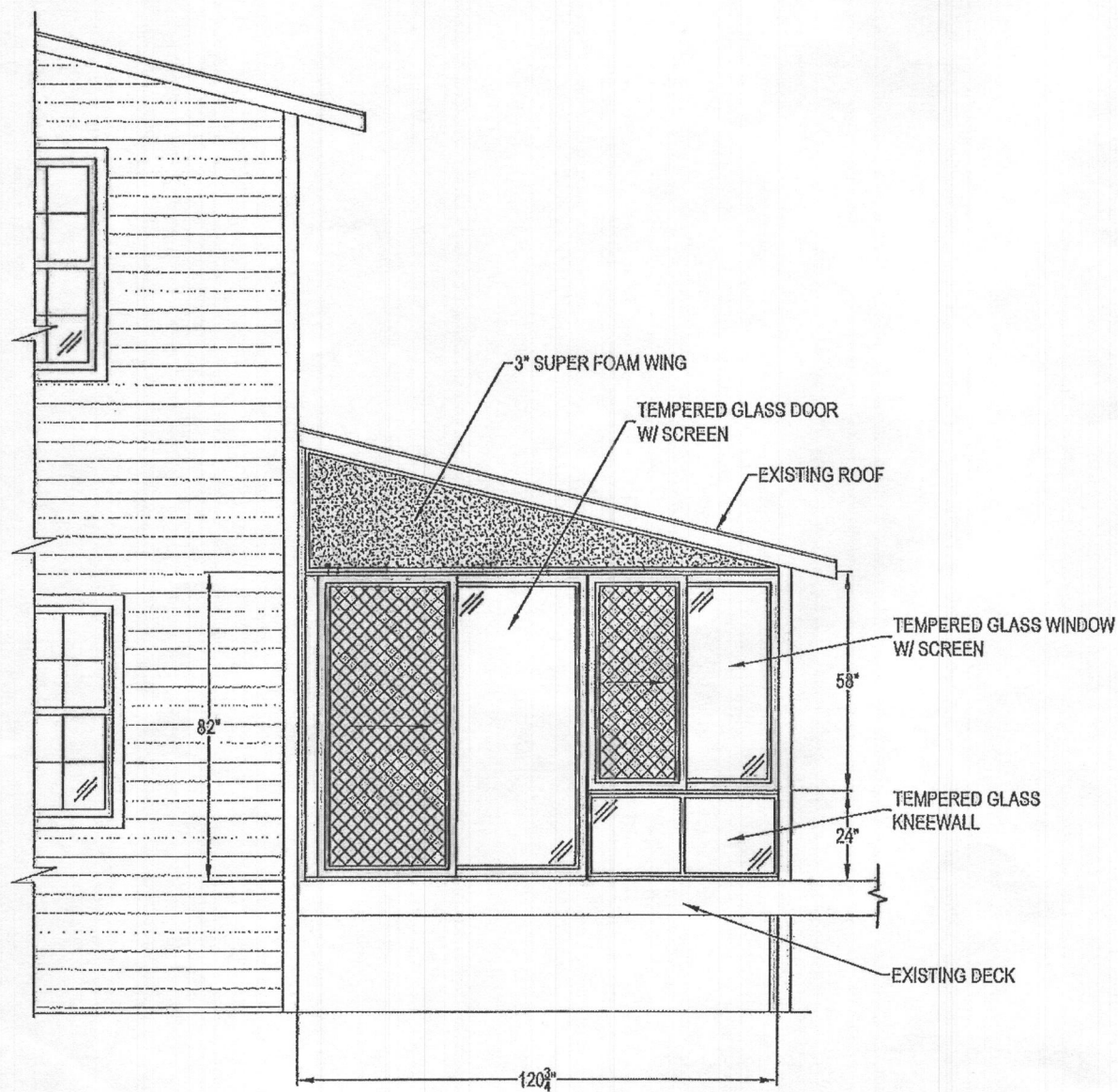
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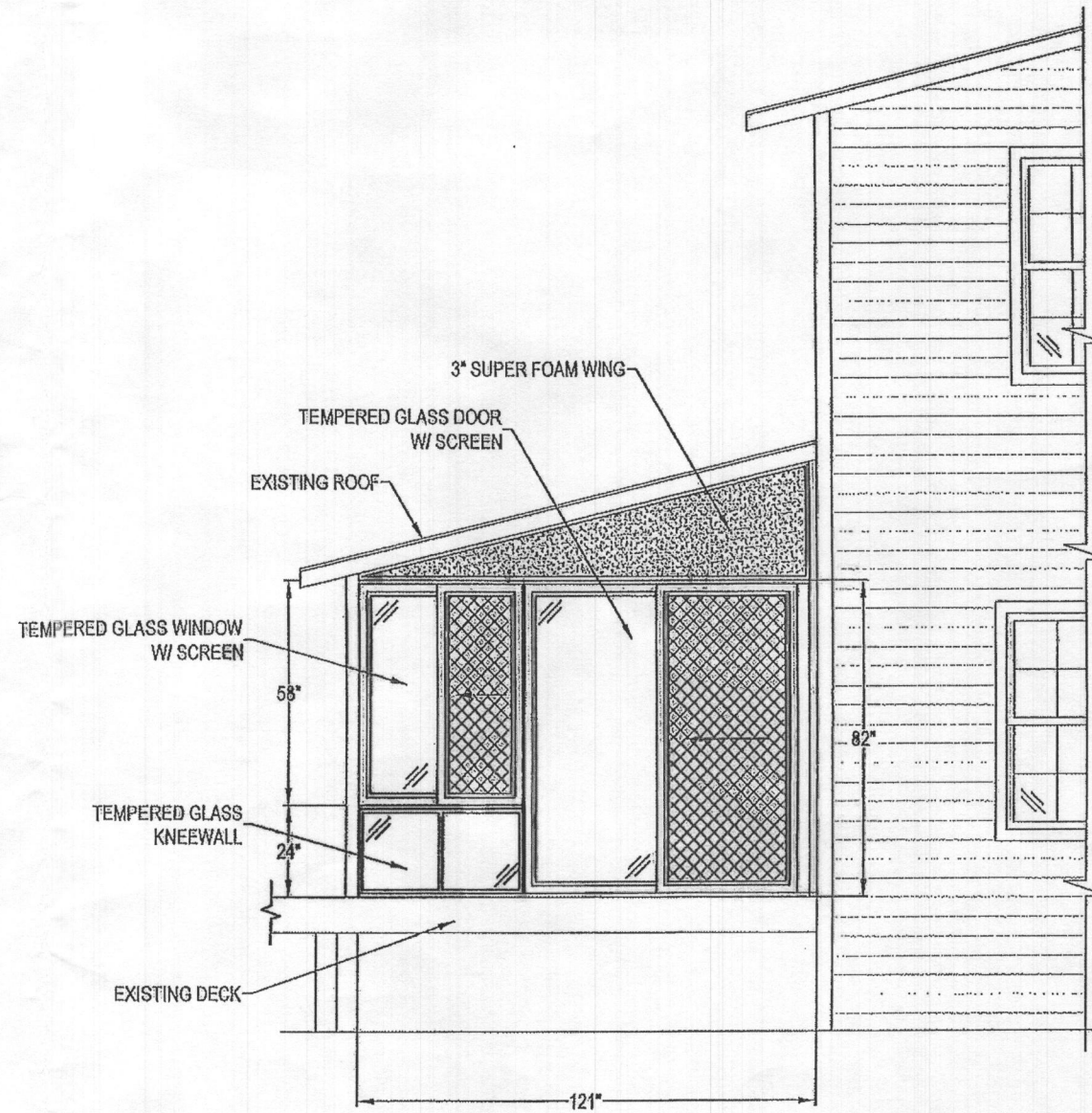
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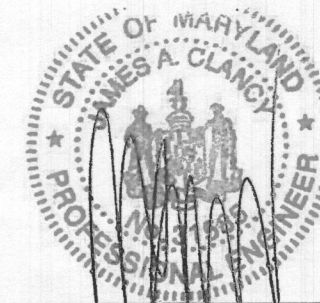
REV. A	10/11/19
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DRAWN	ZMS
SCALE	1/4" = 1'-0"
SHEET	3 OF 5



ELEVATION - "A" WALL
 (RAILINGS NOT SHOWN FOR CLARITY)



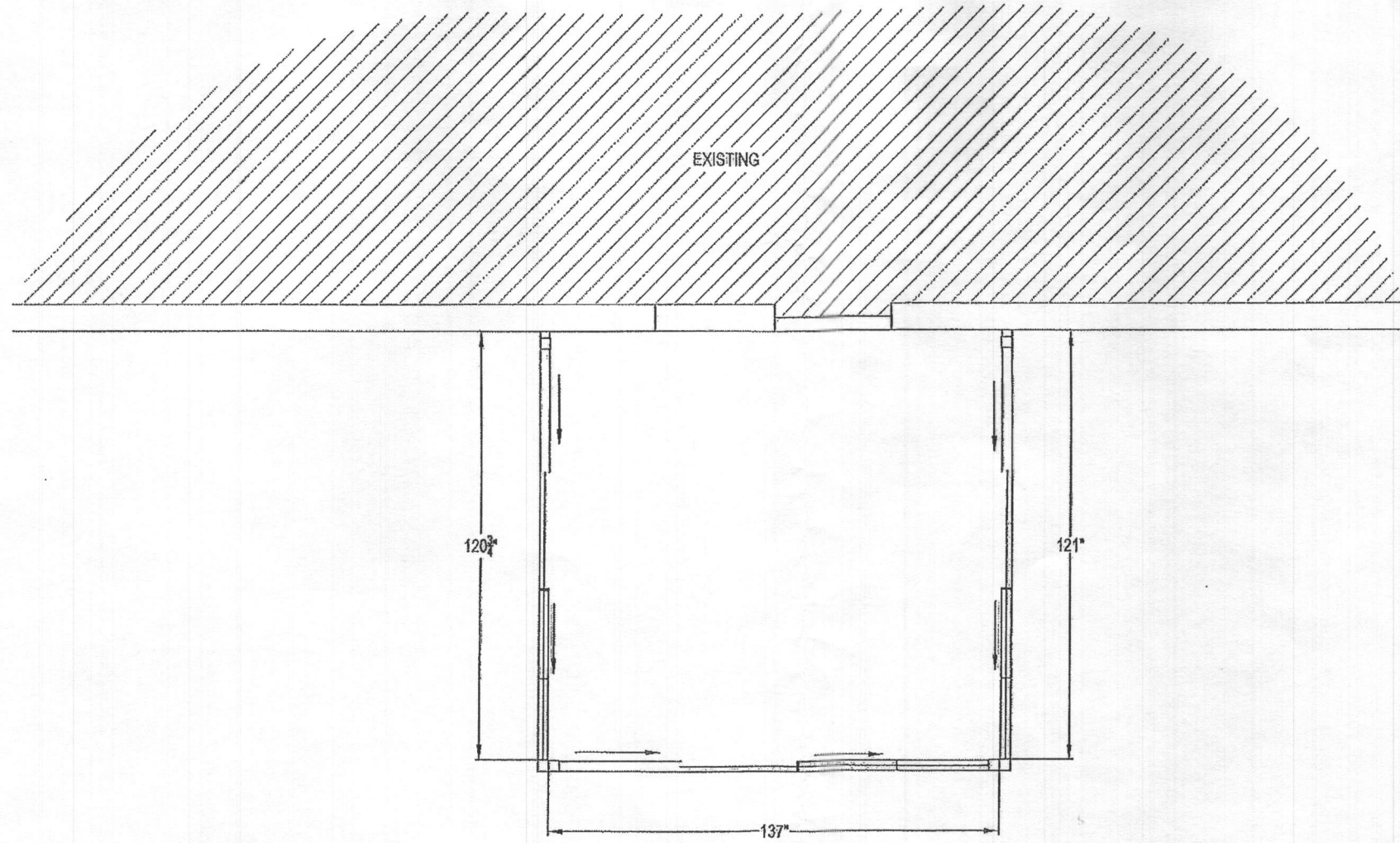
ELEVATION - "C" WALL
 (RAILINGS NOT SHOWN FOR CLARITY)



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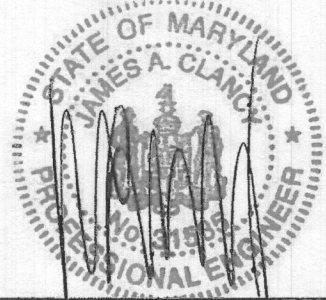


FLOOR PLAN



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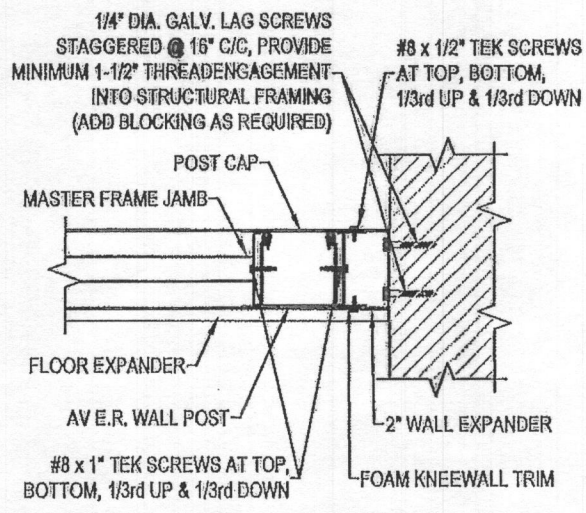


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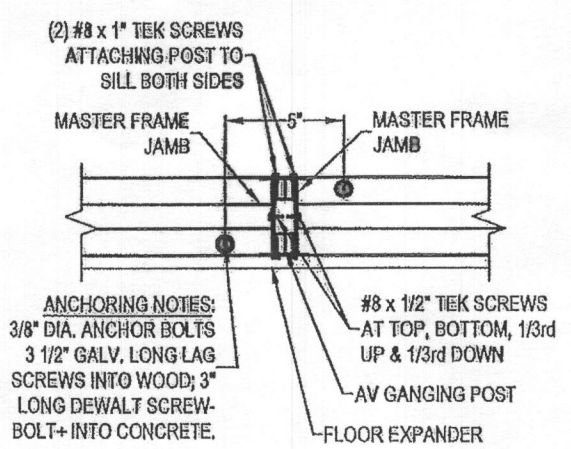
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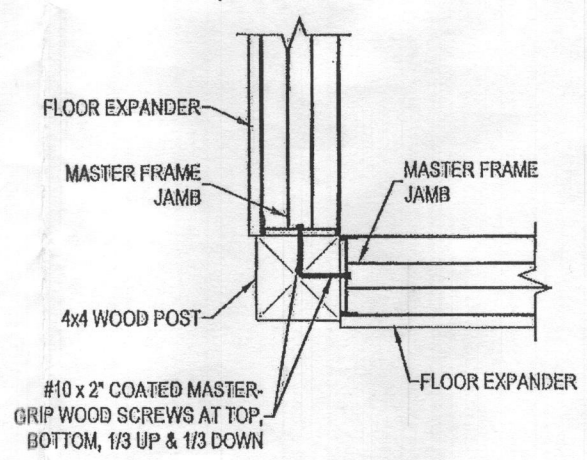
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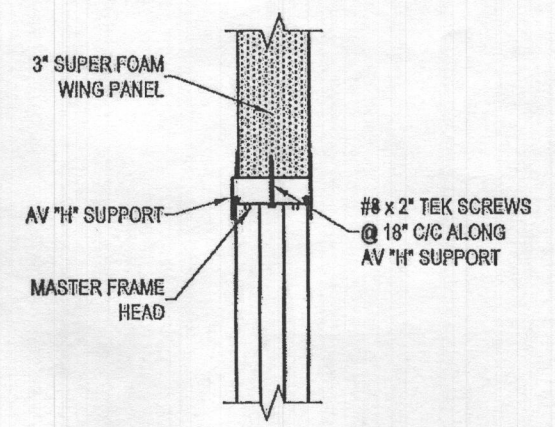
PLAN VIEW OF MASTER FRAME JAMB & AV E.R. WALL POST CONNECTION @ EXISTING WALL



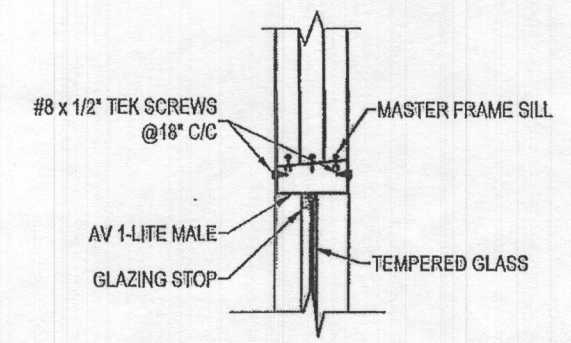
PLAN VIEW OF MASTER FRAME JAMBS CONNECTION @ GANGING POST



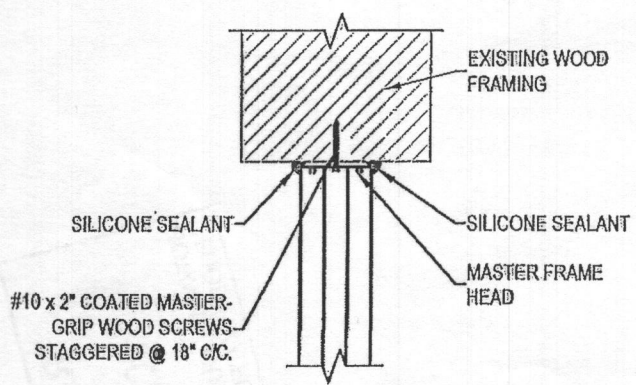
PLAN VIEW OF MASTER FRAME JAMBS CONNECTION @ 4x4 WOOD POST



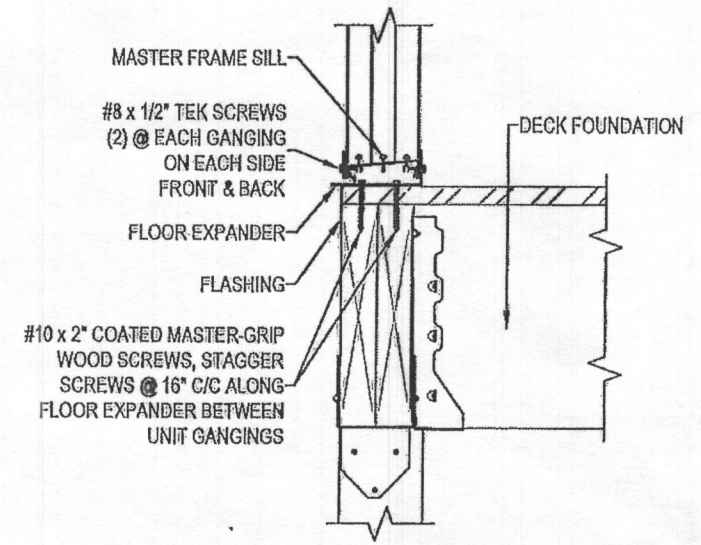
SECTION THROUGH MASTER FRAME HEAD CONNECTION @ FOAM WING



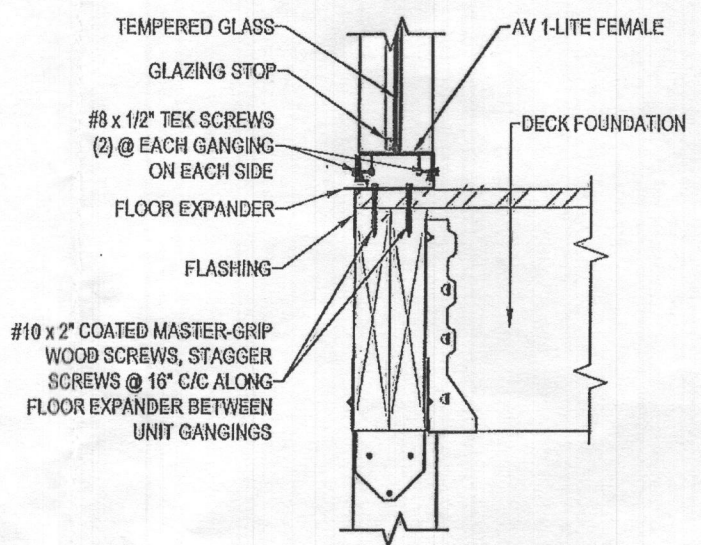
SECTION THROUGH MASTER FRAME SILL CONNECTION @ GLASS KNEEWALL



SECTION THROUGH MASTER FRAME HEAD CONNECTION @ EXISTING HEADER



SECTION THROUGH MASTER FRAME SILL CONNECTION @ DECK FOUNDATION

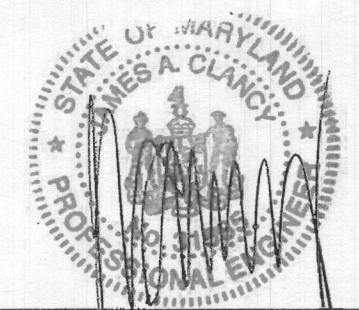


SECTION THROUGH GLASS KNEEWALL CONNECTION @ DECK FOUNDATION



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