



# 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.: B19004211

Building Address: 3685 FOLLY QUARTER ROAD  
City: MARSHVILLE State: MD Zip Code: 21104  
Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Subdivision: FOLLEIGH  
Lot: 2 Tax Map: 0023 Parcel: 0110

Existing Use: VACANT LOT  
Proposed Use: SFD  
Estimated Construction Cost: \$ 450,000

Description of Work: SUMMERFIELD MODEL  
1200S, H CR, 6 BATHS FULL  
ATTACHED  
2 STORY 2 CAR GARAGE, +  
2 CAR DETACHED GARAGE, FRONT PORCH,  
PERFORMANCE IECC UNFINISHED BASEMENT

Occupant/Tenant Name: TOTAL SQFT: 8435  
OCC SQFT: 4110  
Was tenant space previously occupied?  Yes  No  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Property Owner's Name: CBI HOMES, LLC  
Address: 1175 STAFFIELD COURT  
City: MARSHVILLE State: MD Zip Code: 21104  
Phone: 410-442-2211 Fax: 410-442-2215  
Email: pwalter@catonsvillehomes.com

Applicant's Name & Mailing Address, (If other than stated herein)  
Applicant's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Contractor Company: CBI HOMES, LLC  
Contact Person: PAUL WALTER  
Address: 1175 STAFFIELD COURT  
City: MARSHVILLE State: MD Zip Code: 21104  
License No.: 13447201 AKOR 2409  
Phone: 410-442-2211 Fax: 410-442-2215  
Email: pwalter@catonsvillehomes.com

Engineer/Architect Company: PLYMOUTH ROAD ARCHITECTS  
Responsible Design Prof.: LISA WENRICH  
Address: 640 PLYMOUTH ROAD  
City: CITONVILLE State: MD Zip Code: 21228  
Phone: 410-788-0281 Fax: 410-788-1033  
Email: lwennrich@plymouthroadarchitects.com

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:	1st floor: <u>58' 2100</u>	<u>64'</u>
Area of construction (sq. ft.):	2nd floor: <u>38' 2010</u>	<u>64'</u>
Use group:	Basement: <u>58' 2100</u>	<u>64'</u>
Construction type:	<input type="checkbox"/> Finished Basement	
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Unfinished Basement <u>2100'</u>	
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Wood Frame	No. of Bedrooms:	<u>4</u>
<input type="checkbox"/> State Certified Modular	<b>Multi-family Dwelling</b>	
Roadside Tree Project Permit	No. of efficiency units:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units:	
Roadside Tree Project Permit #	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
	Footings:	
	Roof:	
	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Electric:	<input checked="" type="checkbox"/> Yes <input 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 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: \_\_\_\_\_ Print Name: FANIELA A. WALTER  
Email Address: pwalter@catonsvillehomes.com Date: 12/12/19  
Title/Company: CONTROLLER, CBI HOMES, LLC

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 )	<u>12/12/19</u>	<u>[Signature]</u>
PSZA ( Engineering )		
Health	<u>1/3/20</u>	<u>[Signature]</u>

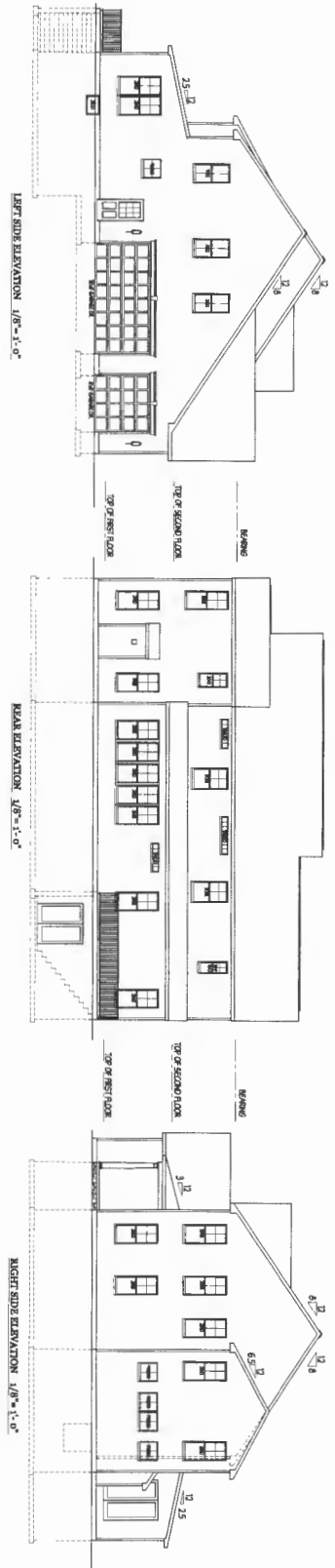
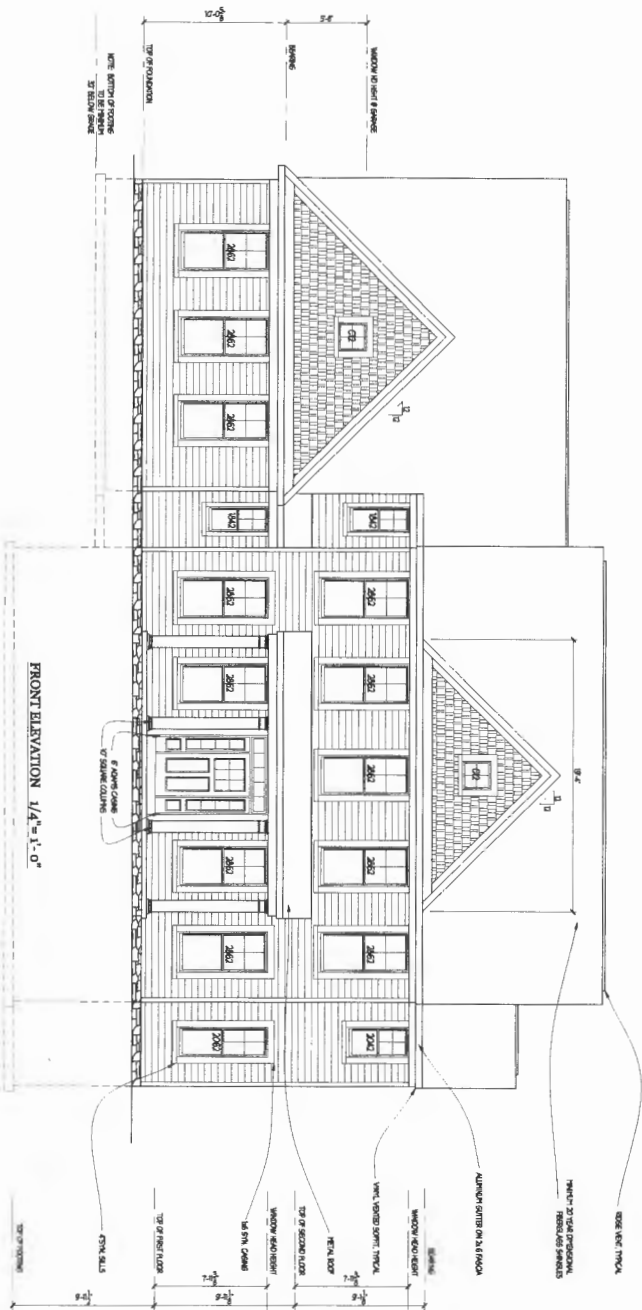
Is Sediment Control approval required for issuance?  Yes  No  
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION	
Front:	<u>50</u>
Rear:	<u>30</u>
Side:	<u>10</u>
Side St.:	
All minimum setbacks met?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	\$ <u>120</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>311</u>

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

M. Cole  
AKH



Healthy

B19004211

REVISED 12/9/19

1

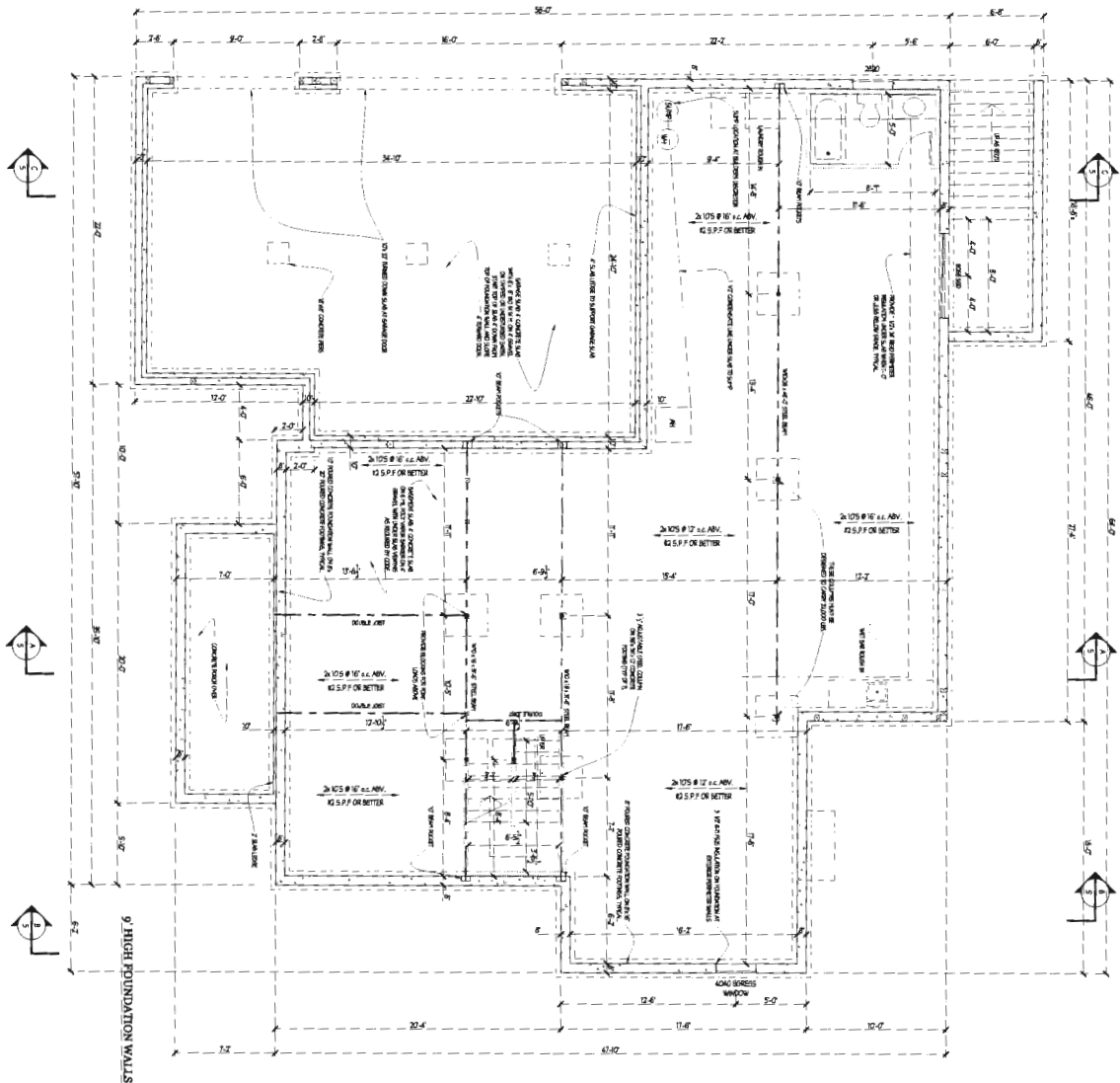
Project No.: C19.16  
Date: 10/19  
Scale: NOTED

Drawing: ELEVATIONS  
Project: CATONSVILLE HOMES  
SUMMERFIELD  
FOXLEIGH LOT 10 (PARCEL)

Notes:

Plymouth Road Architects  
640 Plymouth Road Baltimore, MD 21229  
Phone: 410-788-0281 arch@plymouth-road.com

FOXLEIGH LOT 2



12/29/2019 10:53 AM  
 Summerfield, Foxleigh  
 12/29/2019 10:53 AM

REVISED 12/9/19

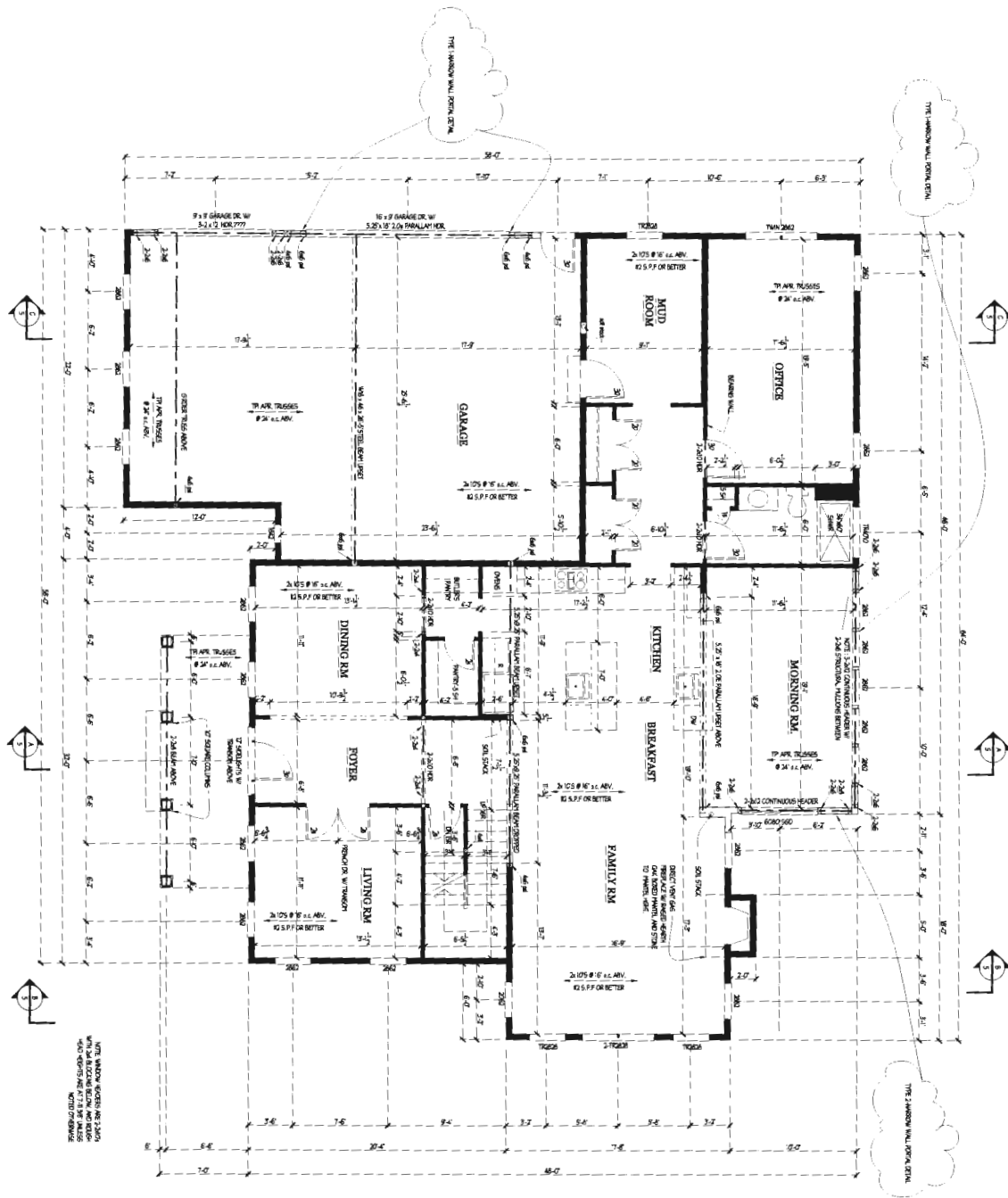
2

Project No.: C19.16  
 Date: 10/19  
 Scale: 1/4" = 1'-0"

Drawing: BASEMENT/ FOUNDATION PLAN  
 Project: CATONSVILLE HOMES  
 SUMMERFIELD  
 FOXLEIGH LOT 110

Notes:

**Plymouth Road Architects**  
 640 Plymouth Road Baltimore, MD 21229  
 Phone: 410-788-0281 arch@plymouth-road.com



WITH WINDOW SIZES AND 2" x 4" CONTINUOUS GLAZING, ALL WINDOWS ARE TO BE OPERATED ON EITHER SIDE OF THE WINDOW.

12/9/19

REVISED 12/9/19

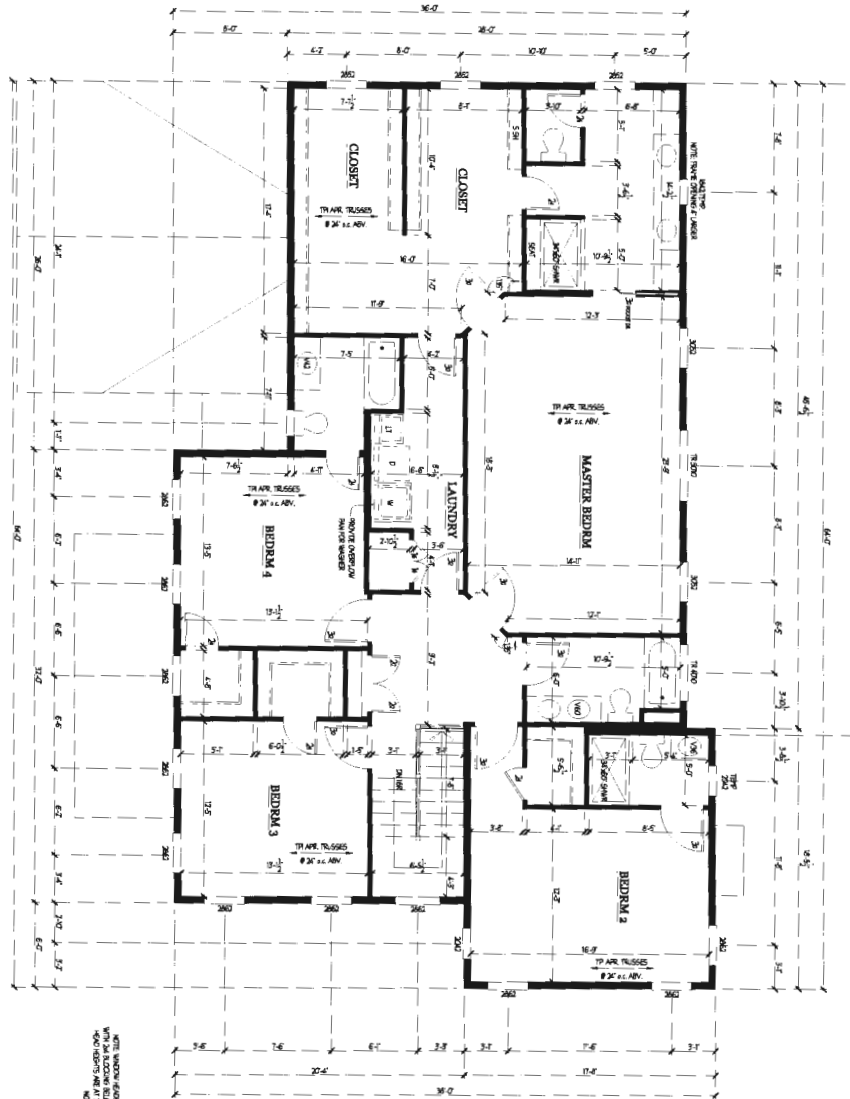
3

Project No.: C19.16  
 Date: 10/19  
 Scale: 1/4" = 1'-0"

Drawing: FIRST FLOOR PLAN  
 Project: CATONSVILLE HOMES  
 SUMMERFIELD  
 FOXLEIGH LOT 110

Notes:

**Plymouth Road Architects**  
 640 Plymouth Road Baltimore, MD 21229  
 Phone: 410-788-0281 arch@plymouth-road.com



NOTE: WINDOW SIZES ARE 2'-0" X 6'-0" UNLESS NOTED OTHERWISE. DOOR SIZES ARE 3'-0" X 6'-0" UNLESS NOTED OTHERWISE.

REVISED 12/9/19  
 12/27/19 EST. BY  
 S:\Projects\19\19-0000\19-0000.dwg

<b>4</b>	Project No.: C19.16	Drawing: SECOND FLOOR PLAN	Notes:	<b>Plymouth Road Architects</b> 640 Plymouth Road Baltimore, MD 21229 Phone: 410-788-0281 arch@plymouth-road.com
	Date: 10/19	Project: CATONSVILLE HOMES SUMMERFIELD FOXLEIGH LOT 110		
	Scale: 1/4" = 1'-0"			





PERMIT NUMBER: B 80001564

DATE ACCEPTED:

DPLP 2020 MAY 22 10:22:00



### RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4

www.howardcountymd.gov

#### BUILDING SITE ADDRESS REQUIRED

Street Address: 3685 Folly Dunes Road		Unit:
City: Ellicott City	State: MD	Zip Code: 21042
Subdivision/Village/Complex Name:		SDP/WP/BA #:
Lot: 2	Tax Map:	Parcel: 110
Grading Permit #:		

#### DESCRIPTION OF WORK REQUIRED

Existing Use: SF Dwelling	Proposed Use: SF Dwelling	Estimated Cost: \$ 6000
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None		
<p>Existing 1-1900 gallon underground propane tank to be removed due to code violation.</p>		

#### PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): CBI Homes LLL	Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: 11175 Stratfield Court	
City: Maer Ottumwa	State: MD
Phone: 410-777-1725	Zip Code: 21004
Email: cbihomes@att.net	

#### APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: Thompson LLC	Contact Name: Anthony Davis
Street Address: 1022 Sparrows Point	
City: Baltimore	State: MD
Phone: 443-826-0506	Zip Code: 21217
Email: adavis@thompsonllc.com	

#### CONTRACTOR INFORMATION REQUIRED

Business Name: Thompson LLC	
Licensee's Name: J Randall Thompson	License #: 60063
Street Address: 5260 W. Forum Dr #200	
City: Frederick	State: MD
Phone: 443-755-5494	Zip Code: 21703
Email: adavis@thompsonllc.com	

#### ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name:	Name:
Street Address:	
City:	State:
Phone:	Zip Code:
Email:	

#### BUILDING CHARACTERISTICS REQUIRED

Primary Structure: <input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> SF Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling (MF*)	Condo: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Utilities: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private (Well)
Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane <input type="checkbox"/> Other:	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Septic)
Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input type="checkbox"/> None	Roadside Tree Project: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes: #
Fire Alarm System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Voice Evac	

#### ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options:				
# of Bedrooms (SF):	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):
# Rooms:	# Full Baths:	# Half Baths:	# Fireplaces:	
Garage/Carport Info: <input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input type="checkbox"/> None				
Basement/Foundation Info: <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Post & Pier <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Finished Basement: <input type="checkbox"/> Full or <input type="checkbox"/> Partial				
1 <sup>st</sup> Fl Width:	1 <sup>st</sup> Fl Depth:	2 <sup>nd</sup> Fl Width:	2 <sup>nd</sup> Fl Depth:	Bsmt Width: Bsmt Depth:
Energy Method: <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI		Gross Area: sq ft	Occupiable Area: sq ft	

#### AGREEMENT / DISCALIMER REQUIRED

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 ORIGINAL SIGNATURE	DATE SIGNED: 5/17/2020
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#### FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:				
<input type="checkbox"/> PR	<input type="checkbox"/> DPZ	<input type="checkbox"/> DED	<input checked="" type="checkbox"/> Health <i>KH</i> 6/4/20	<input type="checkbox"/> SHA <input type="checkbox"/> CID
SUBMITTAL FEES: \$110.00	PAYMENT: 30474	ACCEPTED BY: <i>[Signature]</i>		

Maura J. Rossman, M.D., Health Officer

**MEMORANDUM**

TO: *Pam Walter, CBI Homes, LLC*

FROM: *Robert Bricker, REHS/RS, L.E.H.S.*  
Well & Septic Program

RE: *3685 Folly Quarter Road*, Potential Basement Bedroom

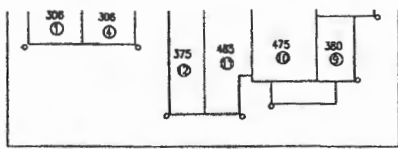
DATE: January 6, 2020

I have reviewed the floor plans in support of Building Permit **B19004211** for a new home at 3685 Folly Quarter Road and noted that there is a rough-in for a full bathroom in the unfinished basement. Please note that this makes it very likely for one or more rooms to be considered bedrooms upon conversion of the basement to finished living space.

For reference, the following is the bedroom definition in Howard County Code Section 3.801(b):

- (1) Except as provided in paragraph (2) of this subsection, a bedroom is any space in the conditioned area of a dwelling unit or accessory structure that:
  - (i) Is 90 square feet or greater in size;
  - (ii) May be used as a private sleeping area; and
  - (iii) Has at least one window and one interior door.
- (2) If a home office, library, or similar room is proposed, it may not be a bedroom if there is no closet; and
  - (i) The room contains permanently built-in bookcases around the perimeter of the room, desks, and other features that encumber the room;
  - (ii) A minimum 4 foot-wide opening, without doors, into another room;
  - (iii) A half wall (4 foot maximum height) between the room and another room; or
  - (iv) The room is a first floor room or basement area that does not have direct access to full bathrooms or "roughed in" plumbing that would provide direct access to future full bathroom facilities.

The Health Department strongly recommends sizing the onsite sewage disposal system at least one bedroom larger than the existing 5- bedroom design to accommodate a future finished basement. If you choose to only size for the existing design, any future building permit for a finished basement may be placed on hold until the system is upgraded to accommodate the proposed number of bedrooms. This memo will be retained in the Health Department file for future reference.



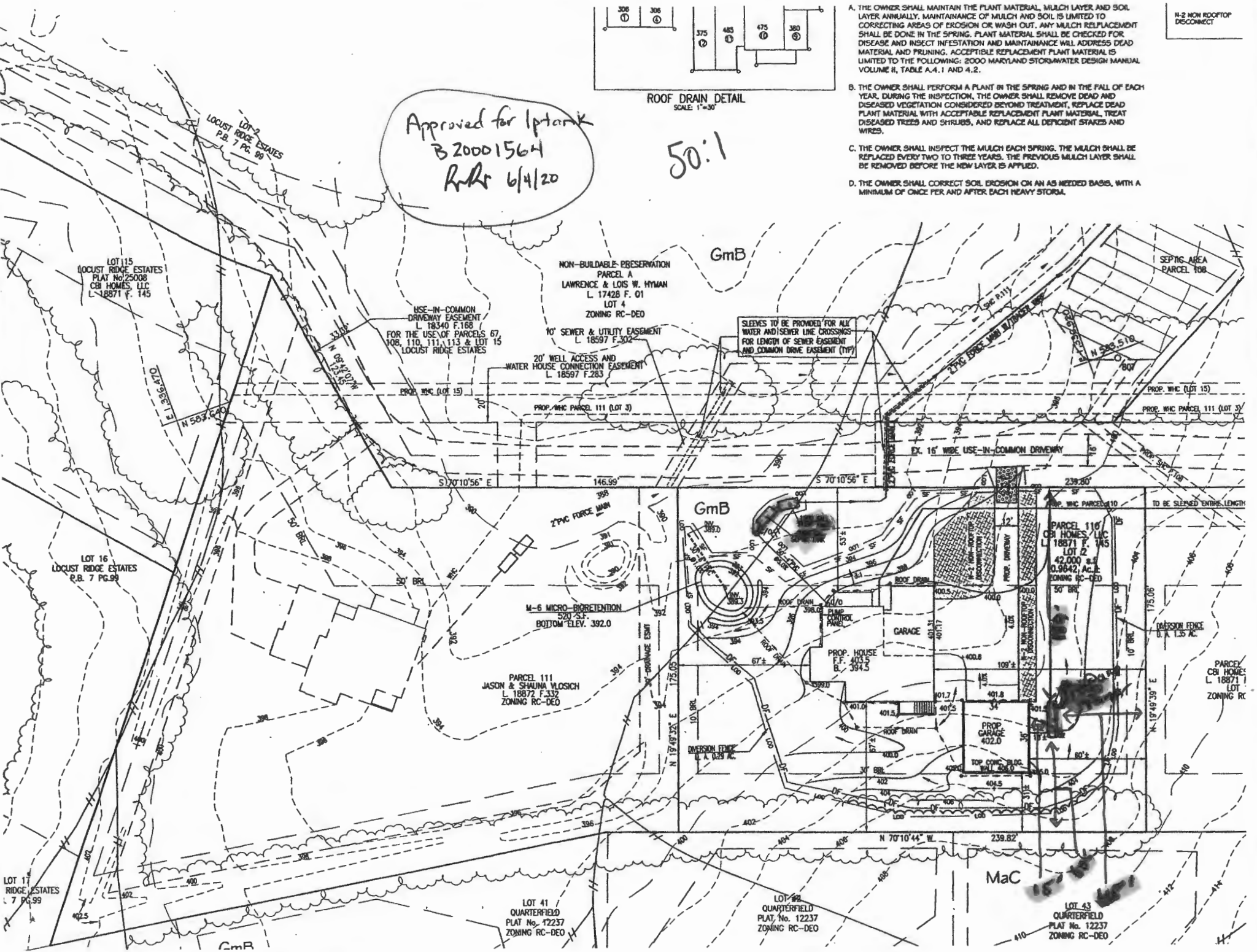
ROOF DRAIN DETAIL  
SCALE: 1"=30"

- A. THE OWNER SHALL MAINTAIN THE PLANT MATERIAL, MULCH LAYER AND SOIL LAYER ANNUALLY. MAINTENANCE OF MULCH AND SOIL IS LIMITED TO CORRECTING AREAS OF EROSION OR WASH OUT. ANY MULCH REPLACEMENT SHALL BE DONE IN THE SPRING. PLANT MATERIAL SHALL BE CHECKED FOR DISEASE AND INSECT INFESTATION AND MAINTENANCE WILL ADDRESS DEAD MATERIAL AND PRUNING. ACCEPTABLE REPLACEMENT PLANT MATERIAL IS LIMITED TO THE FOLLOWING: 2000 MARYLAND STORMWATER DESIGN MANUAL VOLUME II, TABLE A.4.1 AND 4.2.
- B. THE OWNER SHALL PERFORM A PLANT IN THE SPRING AND IN THE FALL OF EACH YEAR. DURING THE INSPECTION, THE OWNER SHALL REMOVE DEAD AND DISEASED VEGETATION CONSIDERED BEYOND TREATMENT, REPLACE DEAD PLANT MATERIAL WITH ACCEPTABLE REPLACEMENT PLANT MATERIAL, TREAT DISEASED TREES AND SHRUBS, AND REPLACE ALL DEFICIENT STAKES AND WIRES.
- C. THE OWNER SHALL INSPECT THE MULCH EACH SPRING. THE MULCH SHALL BE REPLACED EVERY TWO TO THREE YEARS. THE PREVIOUS MULCH LAYER SHALL BE REMOVED BEFORE THE NEW LAYER IS APPLIED.
- D. THE OWNER SHALL CORRECT SOIL EROSION ON AN AS NEEDED BASIS, WITH A MINIMUM OF ONCE PER AND AFTER EACH HEAVY STORM.

N-2 NON ROOFTOP DISCONNECT

Approved for 1ptank  
B 20001564  
RKR 6/4/20

50:1



NON-BUILDABLE PRESERVATION  
PARCEL A  
LAWRENCE & LOIS W. MYMAN  
L 17428 F. 01  
LOT 4  
ZONING RC-DEO

USE-IN-COMMON  
DRIVEWAY EASEMENT  
L 18340 F.168  
FOR THE USE OF PARCELS 67,  
108, 110, 111, 113 & LOT 15  
LOCUST RIDGE ESTATES

10' SEWER & UTILITY EASEMENT  
L 18597 F.302

20' WELL ACCESS AND  
WATER HOUSE CONNECTION EASEMENT  
L 18597 F.283

SLEEVES TO BE PROVIDED FOR ALL  
WATER AND SEWER LINE CROSSINGS  
FOR LENGTH OF SEWER EASEMENT  
AND COMMON DRIVE EASEMENT (TYP)

PARCEL 111  
CBI HOMES, LLC  
L 18871 F. 145  
LOT 2  
42,000 s.f.  
0.9642 Ac.  
ZONING RC-DEO

PARCEL 111  
JASON & SHAUNA VLOSICH  
L 18872 F.332  
ZONING RC-DEO

LOT 41  
QUARTERFIELD  
PLAT No. 12237  
ZONING RC-DEO

LOT 42  
QUARTERFIELD  
PLAT No. 12237  
ZONING RC-DEO

LOT 43  
QUARTERFIELD  
PLAT No. 12237  
ZONING RC-DEO

PARCEL 108  
CBI HOMES  
L 18871 I  
LOT 1  
ZONING RC

TO BE SLEEPED ENTIRE LENGTH

DIVERSION FENCE  
D.A. 1.35 AC.

N 19°49'39" E

175.05

10' BR.

10' BR.

10' BR.

MaC

GmB

GmB

SEPTIC AREA  
PARCEL 108

PROP. WHC (LOT 15)

PROP. WHC (LOT 15)

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