

PERMIT NUMBER: B 20000757

DATE ACCEPTED:



**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: 12050 Old Frederick Rd Unit: \_\_\_\_\_  
 City: Mantoloking State: MD Zip Code: 21104  
 Subdivision/Village/Complex Name: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grading Permit #: \_\_\_\_\_

**DESCRIPTION OF WORK REQUIRED**

Existing Use: Residential Proposed Use: Same Estimated Cost: \$ 56000  
 Trade Work to Be Completed (Separate Permits Required):  Mechanical (HVACR)  Electrical  Plumbing  None  
~ 370 sq ft replacement of existing enclosed porch  
Addition - 1 FB + Laundry room

**PROPERTY OWNER INFORMATION REQUIRED**

Owner(s) Name(s) (As it appears on tax records): John + Sally Hebler Primary Residence:  Yes  No  
 Owner's Street Address: same as above  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: 410-952-4226 Email: \_\_\_\_\_

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

Business Name: Double Diamond Const Contact Name: Emily May  
 Street Address: PO Box 1744  
 City: Westminster State: MD Zip Code: 21158  
 Phone: 410-848-0464 Email: doublediamondcc@gmail.com

**CONTRACTOR INFORMATION REQUIRED**

Business Name: same as applicant  
 Licensee's Name: MHC ~~2121~~ License #: 29849  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

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

**BUILDING CHARACTERISTICS REQUIRED**

Primary Structure:  SF Dwelling  SF Townhouse  SF Duplex  Mobile Home  Multi-Family Dwelling (MF\*) Condo:  Yes  No  
 Utilities:  Electric  Gas Water Supply:  Public  Private (Well) Sewage Disposal:  Public  Private (Septic)  
 Heating System:  Electric  Natural Gas  Propane  Other: \_\_\_\_\_ Roadside Tree Project:  No  Yes: # \_\_\_\_\_  
 Sprinkler System:  NFPA 13  NFPA 13R  NFPA 13D  None Fire Alarm System:  Yes  No  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:  Attached Garage  Detached Garage  Integral Garage  Carport  None  
 Basement/Foundation Info:  Slab on Grade  Post & Pier  Unfinished Basement  Finished Basement:  Full or  Partial  
 1st Fl Width: \_\_\_\_\_ 1st Fl Depth: \_\_\_\_\_ 2nd Fl Width: \_\_\_\_\_ 2nd Fl Depth: \_\_\_\_\_ Bsmt Width: \_\_\_\_\_ Bsmt Depth: \_\_\_\_\_  
 Energy Method:  Prescriptive  Performance  UA Alternative  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 3/5/20

**FOR OFFICE USE ONLY**

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

**AGENCIES REQUIRED/APPROVALS:**

PR \_\_\_\_\_  DPZ \_\_\_\_\_  DED \_\_\_\_\_  Health Burke  SHA  CID

UBMITTAL FEES: \_\_\_\_\_ PAYMENT: cash 11500 ACCEPTED BY: \_\_\_\_\_

Hebner  
 Addition

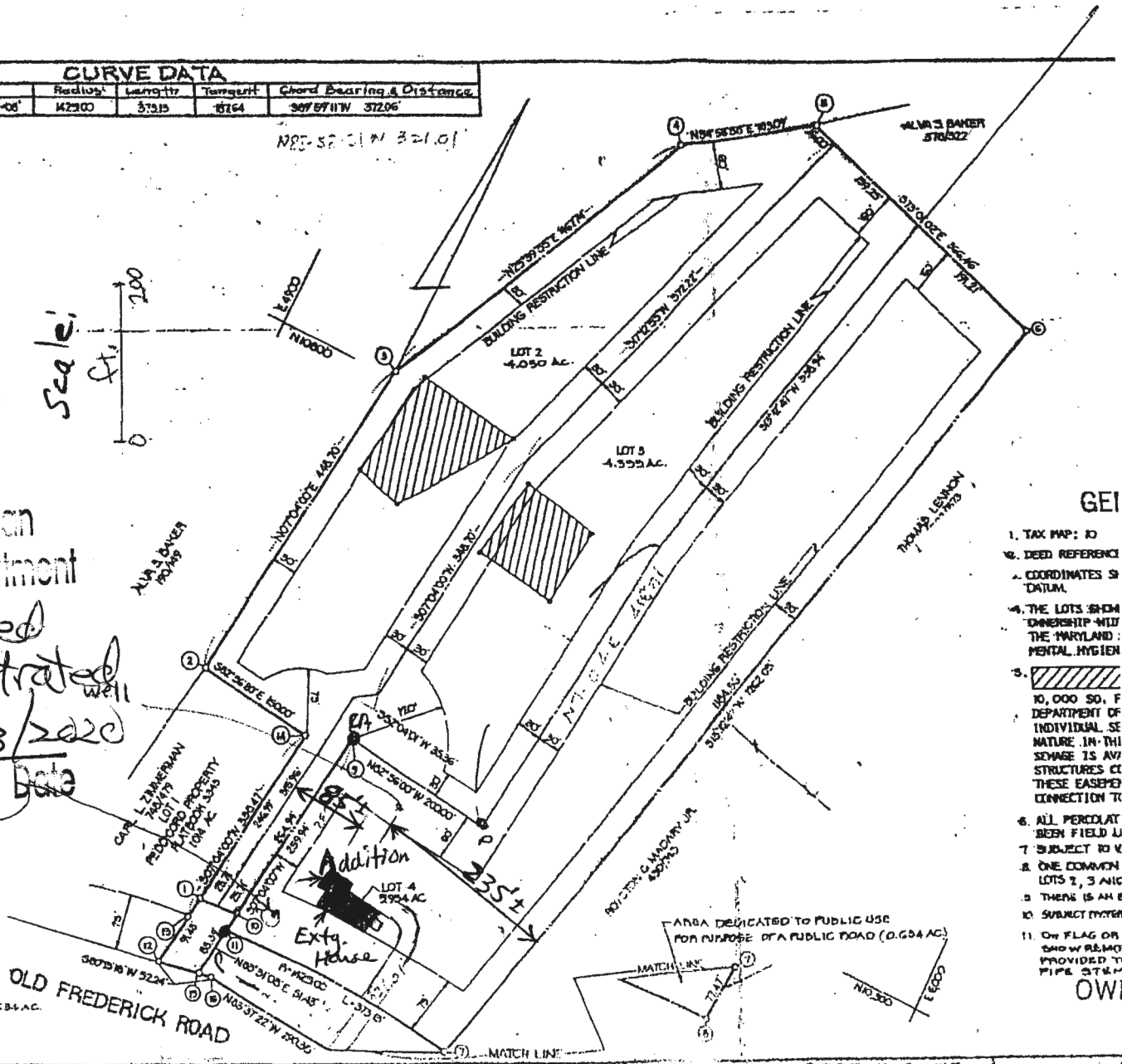
12050 Old Frederick Rd.

COORDINATE SCHEDULE			CURVE DATA					
NO.	NORTH	EAST	NO.	A	Radius	Length	Tangent	Chord Bearing & Distance
1	10297.103	5117.465	7-11	15°-00'-00"	142300	57515	15164	S07°57'11"W 372.06'
2	12524.967	4970.791						
3	12820.763	3084.194						
4	11250.357	5256.700						
5	11335.510	5406.727						
6	11228.081	5757.200						
7	10079.850	5488.449						
8	9999.760	5466.187						
9	10284.634	5301.61						
10	10081.706	5486.567						
11	10080.075	5465.677						
12	10079.115	5406.222						
13	10075.030	5114.351						
14	10055.018	5401.633						
15	10077.787	5457.677						
16	10021.919	5119.237						

Scale:  
 1" = 100'  
 0 100 200  
 Ft.

Approved Septic System Plan  
 Howard County Health Department  
 Addition approved  
 as illustrated  
 R. Bricker  
 Signature  
 4/3/2020  
 Date

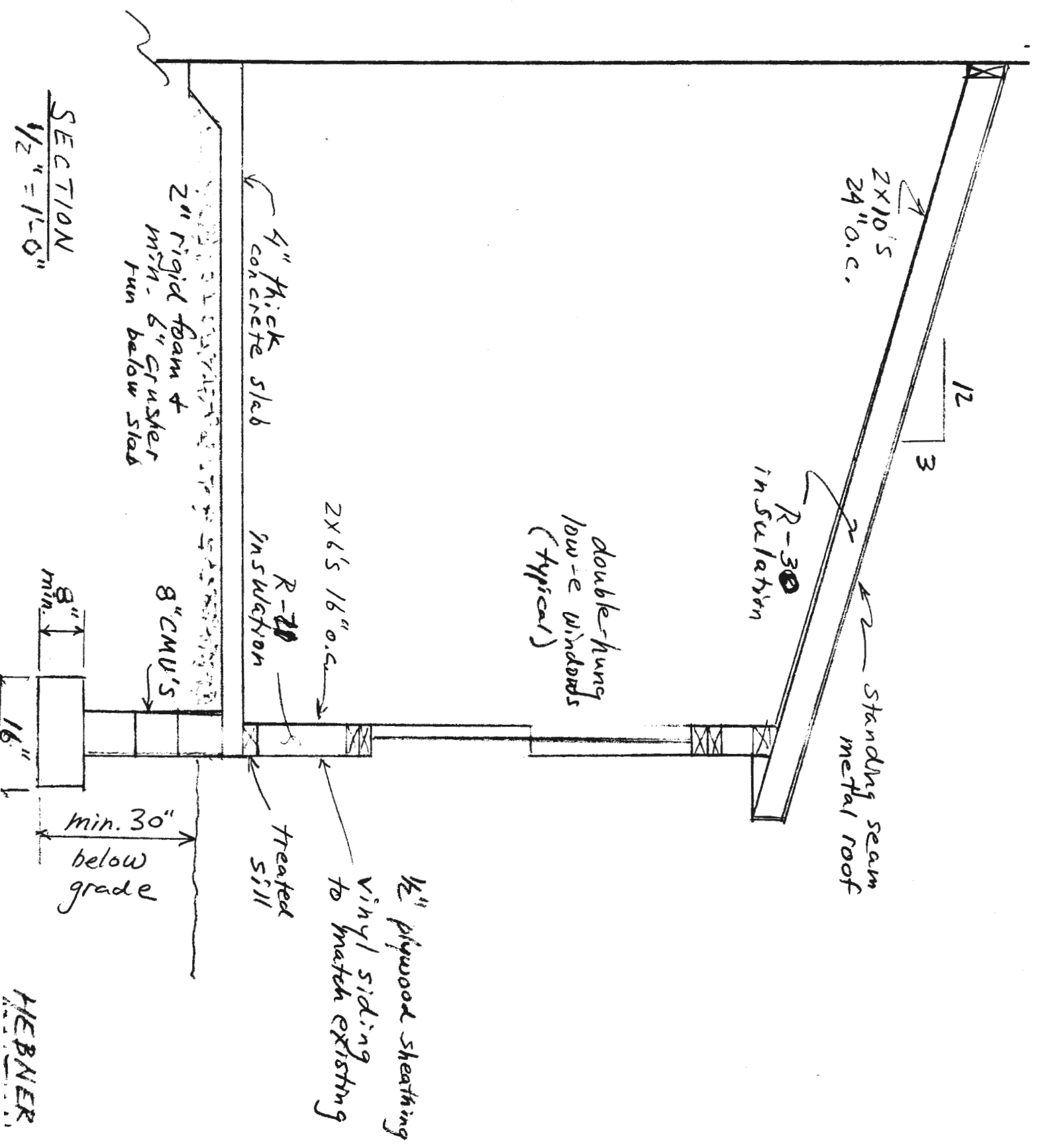
**AREA TABULATIONS**  
 TOTAL NUMBER OF LOTS: 3  
 TOTAL AREA OF LOTS: 14,574 AC.  
 TOTAL AREA OF RIGHT-OF-WAY RESERVATION: 0.634 AC.  
 TOTAL AREA OF FLOOD PLAIN DEDICATION: NONE  
 TOTAL AREA OF PLAT: 15,208 AC.



- GEI**
1. TAX MAP: 10
  2. DEED REFERENCE
  3. COORDINATES & DATUM
  4. THE LOTS SHOWN OWNERSHIP WITH THE MARYLAND MENTAL HYGIEN
  5. 10,000 SQ. FT. DEPARTMENT OF INDIVIDUAL SE NATURE. IN THIS SEWER IS ANY STRUCTURES OR THESE EASEMENT CONNECTION TO
  6. ALL PERCOLAT BEEN FIELD U
  7. SUBJECT TO V
  8. ONE COMMON LOTS 2, 3 AND
  9. THERE IS AN E
  10. SUBJECT TO THE
  11. ON FLAG OR SHOWN HEREIN PROVIDED TO PIPE SYSTEM
- OWI

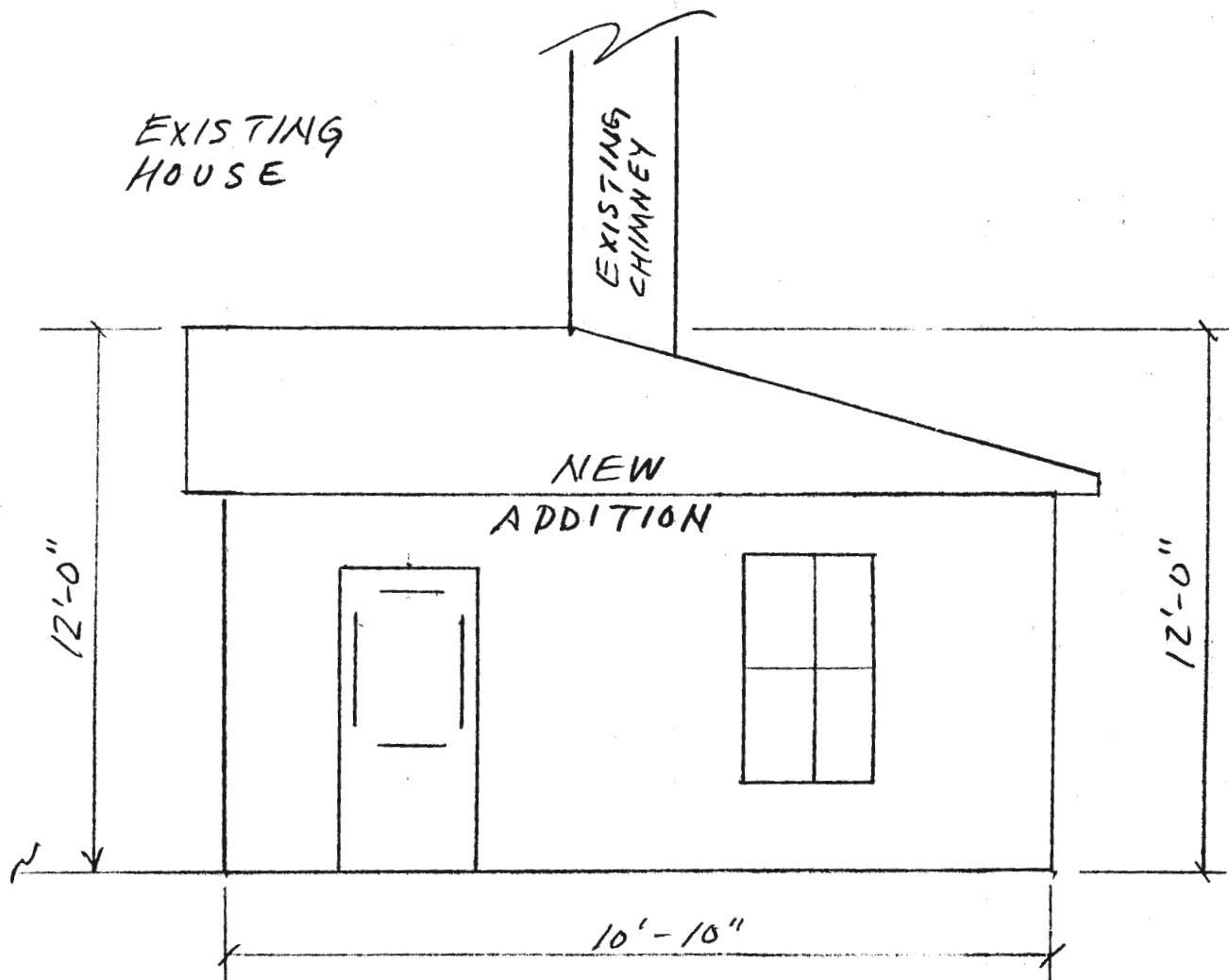


# EXISTING HOUSE



SECTION  
1/2" = 1'-0"

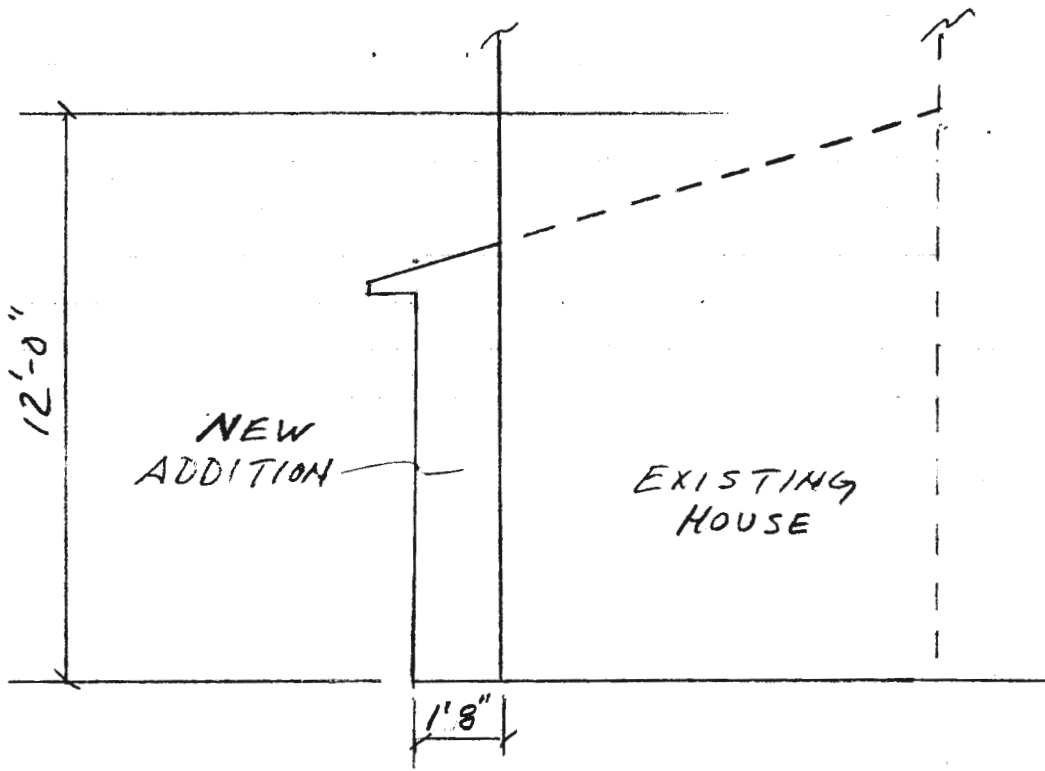
HEBNER



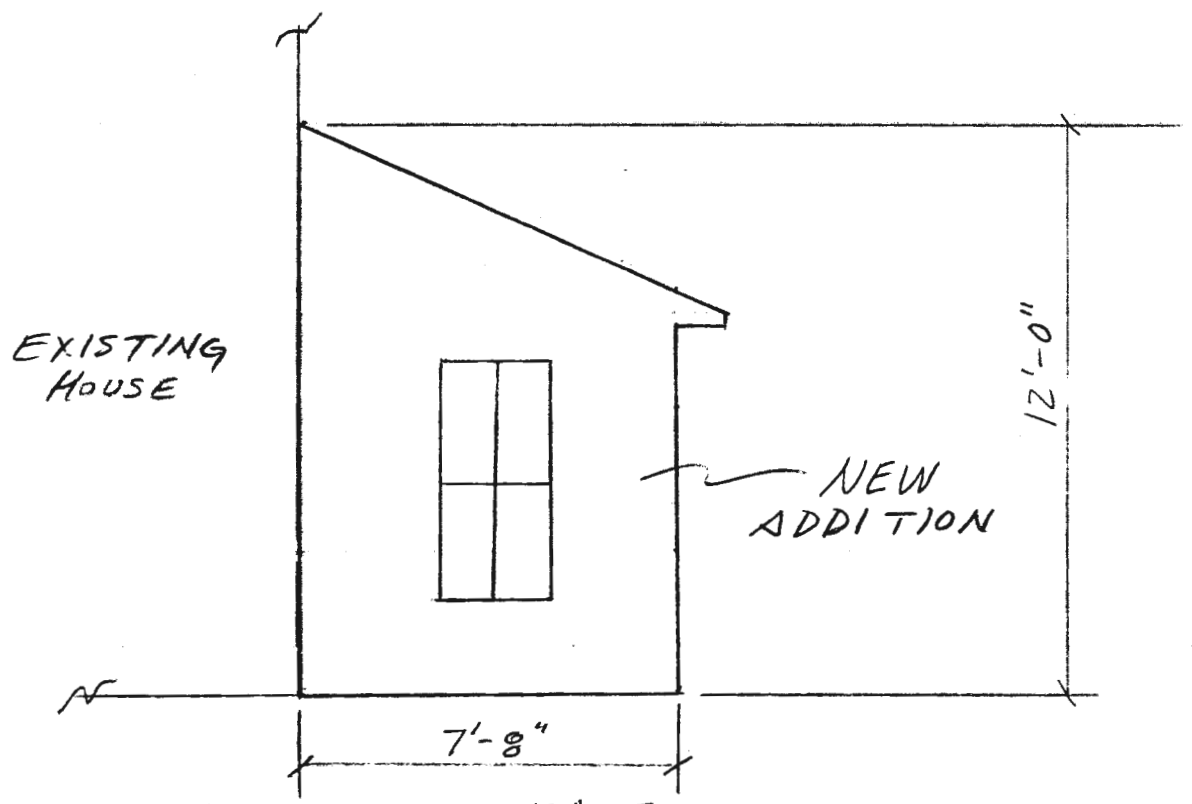
ELEVATION NORTH  
1/4" = 1'-0"

DOUBLE DIAMOND CONSTRUCTION  
P. O. BOX 1744  
WESTMINSTER, MD 21158

HEBNER  
ADDITION



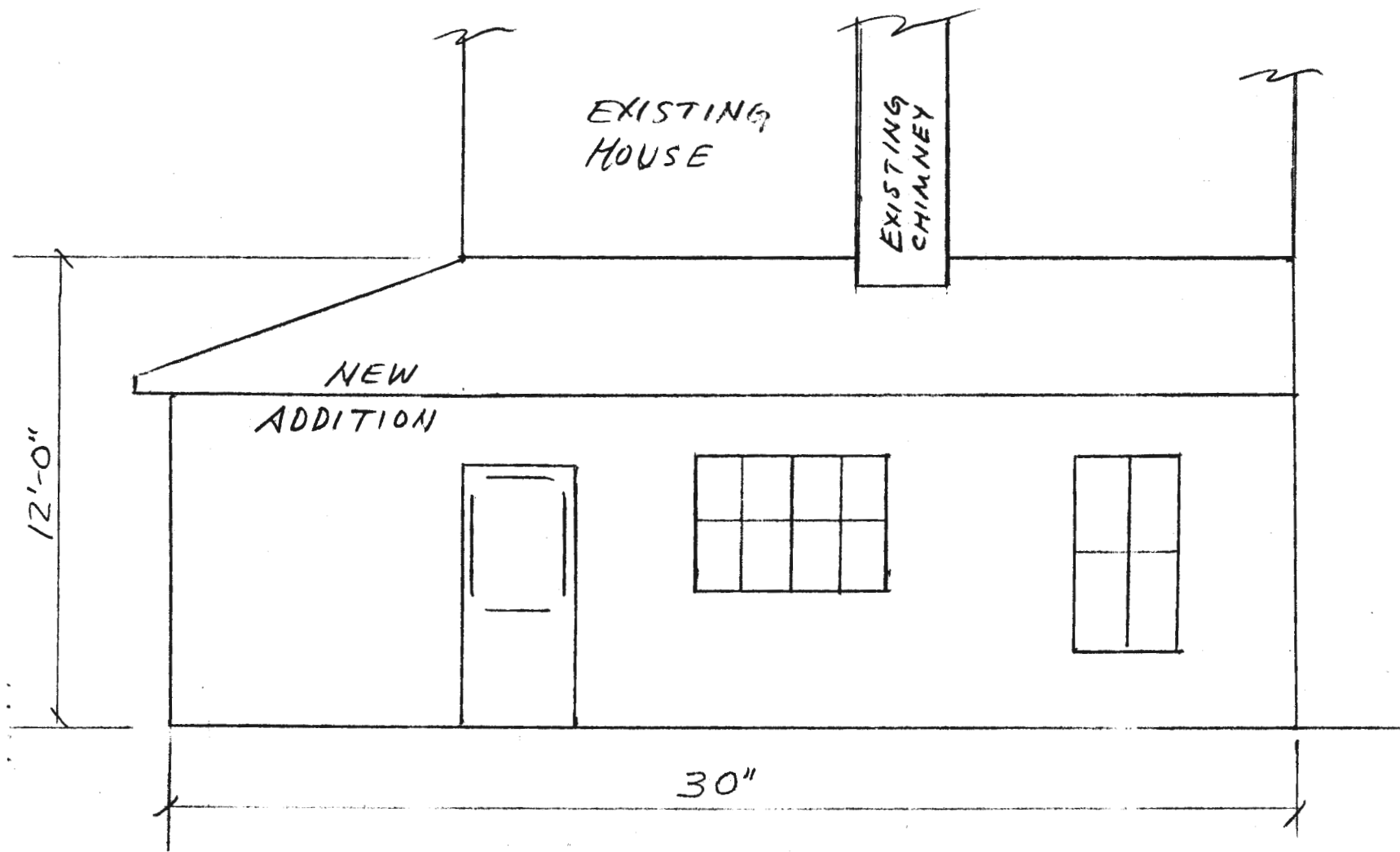
ELEVATION SOUTH  
 $\frac{1}{4}'' = 1'-0''$



ELEVATION EAST  
 $\frac{1}{4}'' = 1'-0''$

DOUBLE DIAMOND CONSTRUCTION  
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HEBNER  
 ADDITION



ELEVATION WEST  
 1/4" = 1'-0"

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HEBNER  
 ADDITION