



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: 7/1/19

Permit No.: B19002173

Building Address: 3422 HAWKINS COURT
 City: Inglwood State: MD Zip Code: 20777
 Sub/Apt. #: _____ SDP/WP/BA #: _____
 Subdivision: Federal Security Mill
 Lot: 4 Tax Map: 40-11 Parcel: _____
 Existing Use: Vacant Lot
 Proposed Use: Single Family Home
 Estimated Construction Cost: \$ 652,954
 Description of Work: Rebuild of existing room 3-car garage, 2 story full bath, 1HR, 4FB, 1HR, 1FP, porch & car gar. NOTE - this does not include deck, porch or windshield
 Occupant/Tenant Name: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Williamburg Home
 Address: 3422 Hawkins Court #200
 City: Columbia State: MD Zip Code: 21044
 Phone: 410-472-2800 Fax: _____
 Email: maria@williamburghome.com
 Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____
 Contractor Company: _____
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: 155
 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: _____
Area of construction (sq. ft.): _____	2 nd floor: _____
Use group: _____	Basement: _____
Construction type: _____	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Unfinished Basement
<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>5</u>
<input type="checkbox"/> State Certified Modular	Multi-family Dwelling
<input type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units: _____
<input type="checkbox"/> Yes <input 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 checked="" 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>G19000193</u>	
GP-19-100	
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: 7/1/19

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>7/30/19</u>	<u>R. B. Williams</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>10</u>
Permit Fee	\$	
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	<u>20</u>
Guaranty Fund	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub- Total Paid	\$	
Balance Due	\$	<u>10</u>
Check	#	

**COMPLETE THIS FORM WHEN DROPPING OFF ANY
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:**

Date: 7/23/2019

To: Robert Bricker
(Person's Name and Division)

From: GLW (410) 880 1820
(Your Name, Company Name and Telephone Number)

Subject: Project name Estates at Schooley Mill
Project site address 7422 Haven Court - Lot 4
Permit # B19002173 SDP # _____
Other information pertinent to this project _____

Please check the attachments below that you are submitting with this transmittal:

- Letter of response to address plan review comment letter
- Revised plans and/or revised details: When submitting for a complete re-review, **duplicate sets shall be submitted.**
- Letter Summarizing Changes
- Energy conservation calculations
- Copies of _____ (be specific).
- Health Department Request DPZ/ DED Request Applicant's Request
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____
- Other Rev. plot plan to show septic tanks locations

Contact Person Information: (Required)

Kristy Pierce
Please Print Name

Telephone No: 410 880 1820

E-Mail Address: kpierce@glwpa.com

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

Received by MF

For Health
Revision

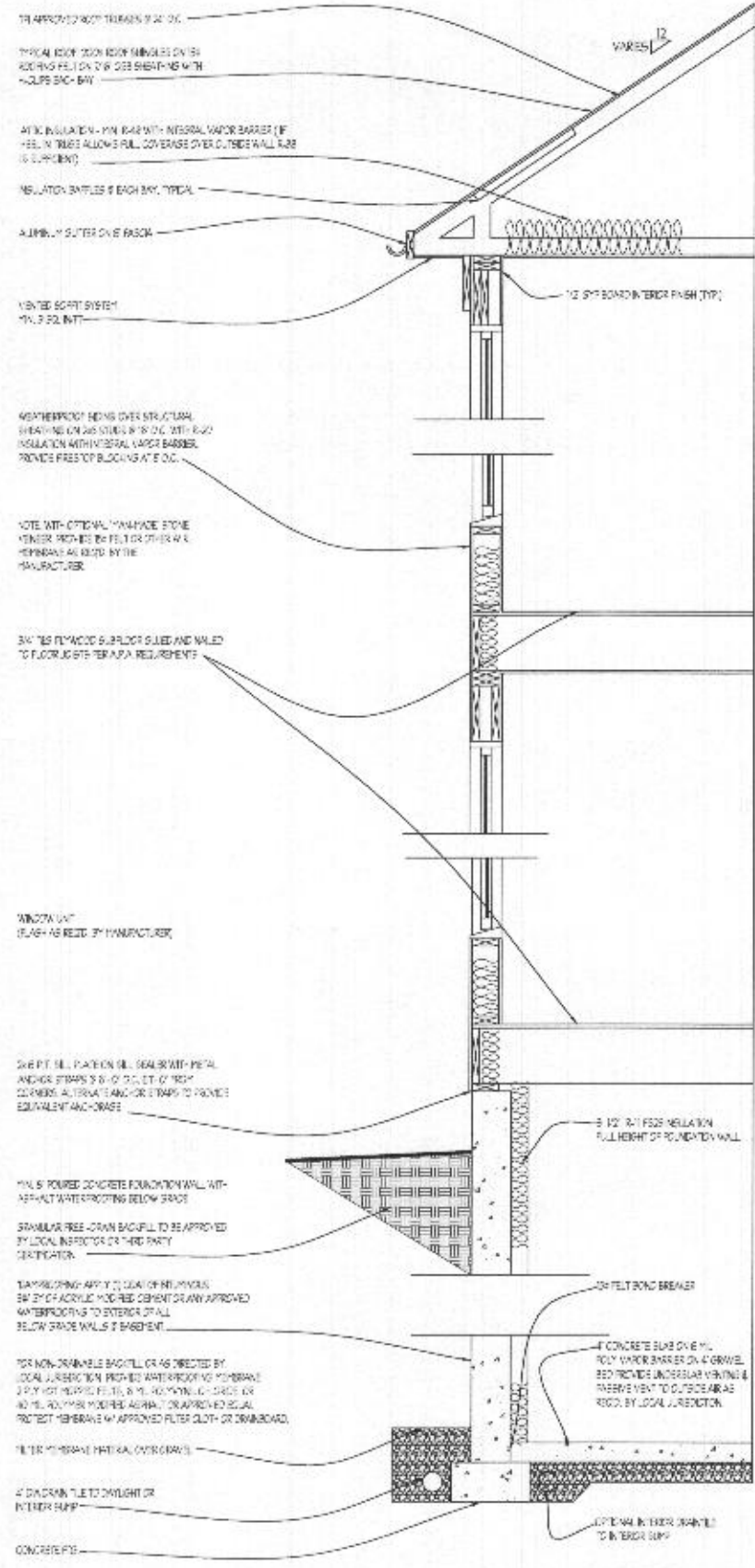
FOUNDATION DESIGN SCHEDULES

PLAIN CONCRETE WALLS				PLAIN CONCRETE WALLS			
BASED ON GROUP 1 SOILS (W/SP BR ST)				BASED ON GROUP 2 OR 3 SOILS			
WALL THICKNESS	WALL HEIGHT	MAX. UNDRANDED FILL	REINFORCING	WALL THICKNESS	WALL HEIGHT	MAX. UNDRANDED FILL	REINFORCING
8"	8' OR F	7'	5	8" W/ #4@24" OC	8'	7'	5
10"	8' OR F	7'	5	8" W/ #4@24" OC	8'	7'	5
12"	8' OR F	7'	5	10" W/ #4@24" OC	8'	7'	5
12"	8' OR F	7'	5	10" W/ #4@24" OC	8'	7'	5
12"	8' OR F	7'	5	12" W/ #4@24" OC	8'	7'	5

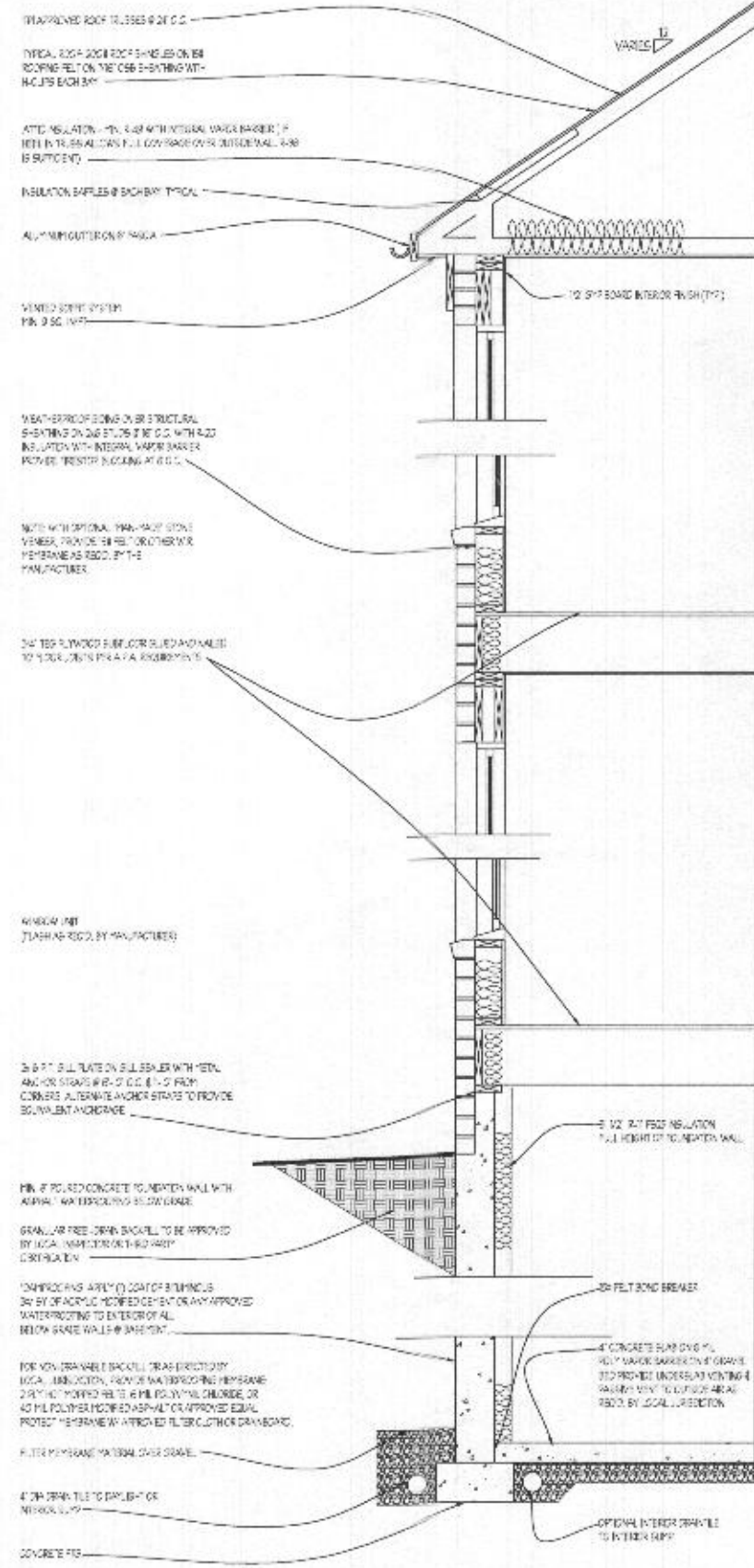
PERIMETER SPREAD FOOTINGS:		
MIN. FOOTING BASED ON SOIL BEARING CAPACITY (NOTED) MIN. THICKNESS FOR SUPPORTING		
FLOOR AND ROOF	1500 PSF SOIL	3000 PSF SOIL
1 FLOOR AND ROOF	16"	16"
2 FLOORS AND ROOF	20"	18"
1 FLOOR AND ROOF W/ BRCK	20"	22"
2 FLOORS AND ROOF W/ BRCK	26"	20"
3 FLOORS AND ROOF W/ BRCK	32"	24"

PIER FOOTINGS AND COLUMNS					
MIN. PLAN CONCRETE FOOTING DEEP BASED ON COLUMN DESIGN LOAD AND SOIL BEARING CAPACITY (NOTED)					
LEV.	MAX. VERT. LOAD	MAX. COLUMN HEIGHT	COLUMN SIZE	1500 PSF SOILS	3000 PSF SOILS
A	10,000 LB	10'	12" x 12"	24" x 24"	24" x 24"
B	15,000 LB	10'	12" x 12"	24" x 24"	24" x 24"
C	20,000 LB	10'	12" x 12"	24" x 24"	24" x 24"
D	25,000 LB	10'	12" x 12"	24" x 24"	24" x 24"

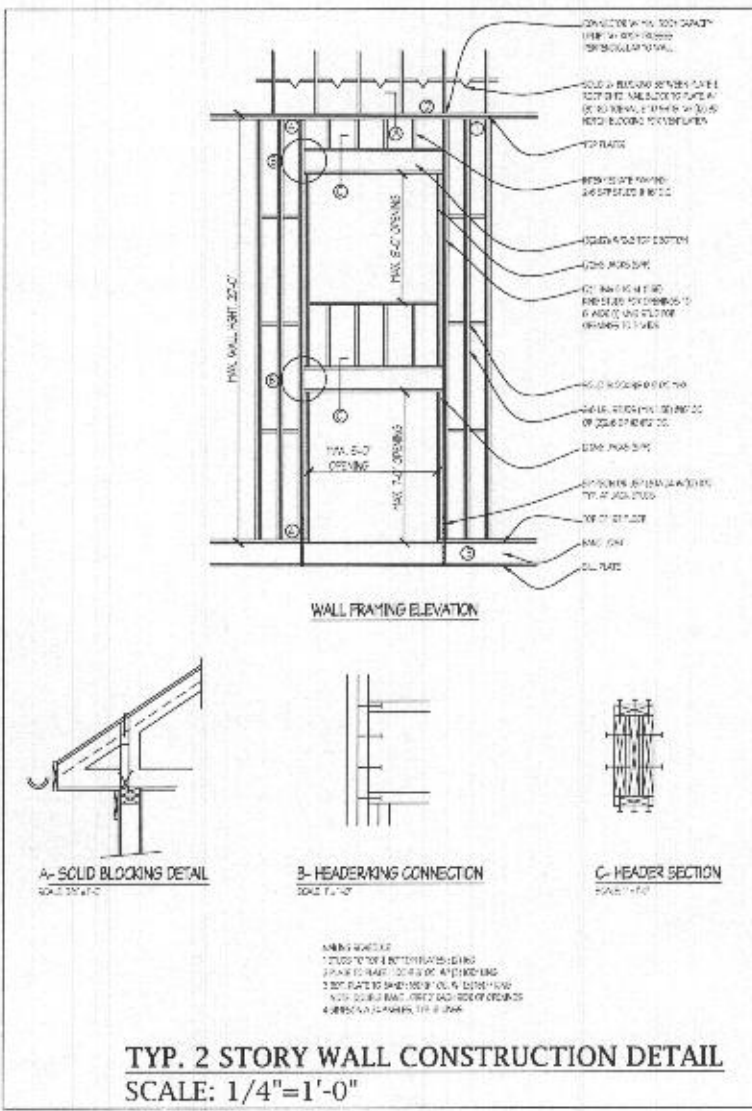
NOTE: MIN. DEPTHS SHOWN REDUCED TO MIN. 12" THICKNESS AT ALL CORNERS & 8" OC EACH WAY @ FOUNDATION



WALL SECTION W/ SIDING
SCALE: 3/4"=1'-0"



WALL SECTION W/ BRICK VENEER
SCALE: 3/4"=1'-0"



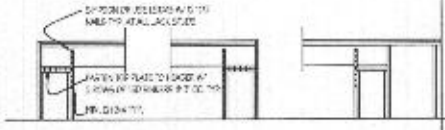
DATE	REVISION

Date: 5/15
Scale: NOTED
Drawn: TIM

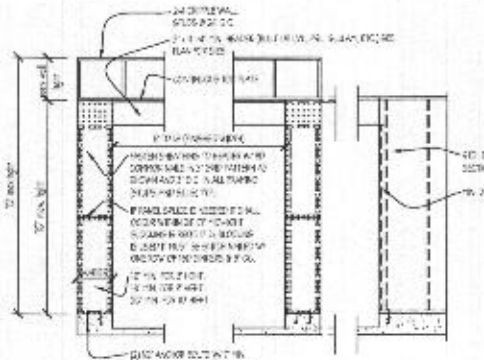
Drawing: WALL SECTIONS
Project: WILLIAMSBURG GROUP
THE RUTLEDGE ESTATE HOME

1067 RE
Project No.

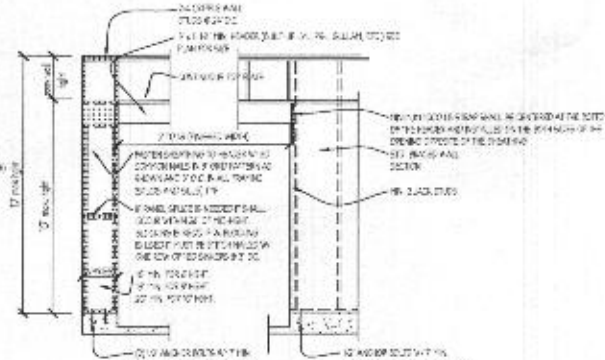




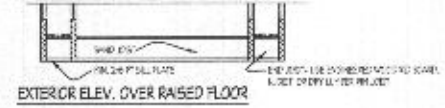
INTERIOR ELEVATION



TWO SIDED NARROW WALL PORTAL FRAME
EXTERIOR ELEV. DIRECT TO FOUNDATION



ONE SIDE PORTAL FRAME FOR
SEISMIC DESIGN A, B AND C AT GARAGE



NARROW WALL PORTAL DETAILS - TYPE 1

NARROW WALL BRACING DETAILS

NOTE: BRACING SHALL BE PROVIDED TO BRACE THE BRACED WALL PANELS TO THE FOUNDATION. BRACING SHALL BE PROVIDED TO BRACE THE BRACED WALL PANELS TO THE FOUNDATION. BRACING SHALL BE PROVIDED TO BRACE THE BRACED WALL PANELS TO THE FOUNDATION.

LENGTH REQUIREMENTS FOR BRACED WALL PANELS IN A CONTINUOUSLY SHEATHED WALL.

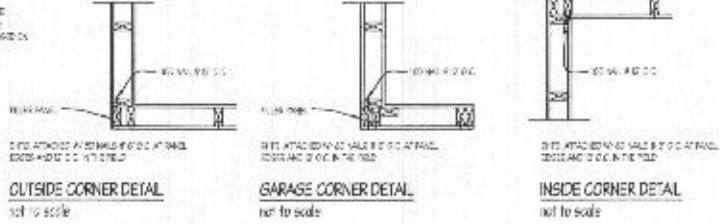
A. LINEAR INTERPOLATIONS SHALL BE PERMITTED.
B. WALL HEIGHTS SHALL BE LIMITED TO OTHER SIDE OF GARAGE OPENINGS THAT SUPPORT LIGHT FRAME ROOFS ONLY WITH ROOF CEILING LOADS OF BRACER SHALL BE LIMITED TO 1/2 AREA OF BRACER.

MINIMUM LENGTH OF BRACED WALL PANEL (INCHES)			MINIMUM OPENING HEIGHT NEXT TO THE BRACED WALL PANEL (60% WALL HEIGHT)
40	54	60	
40	54	60	100%
32	36	40	85%
24	27	30	65%

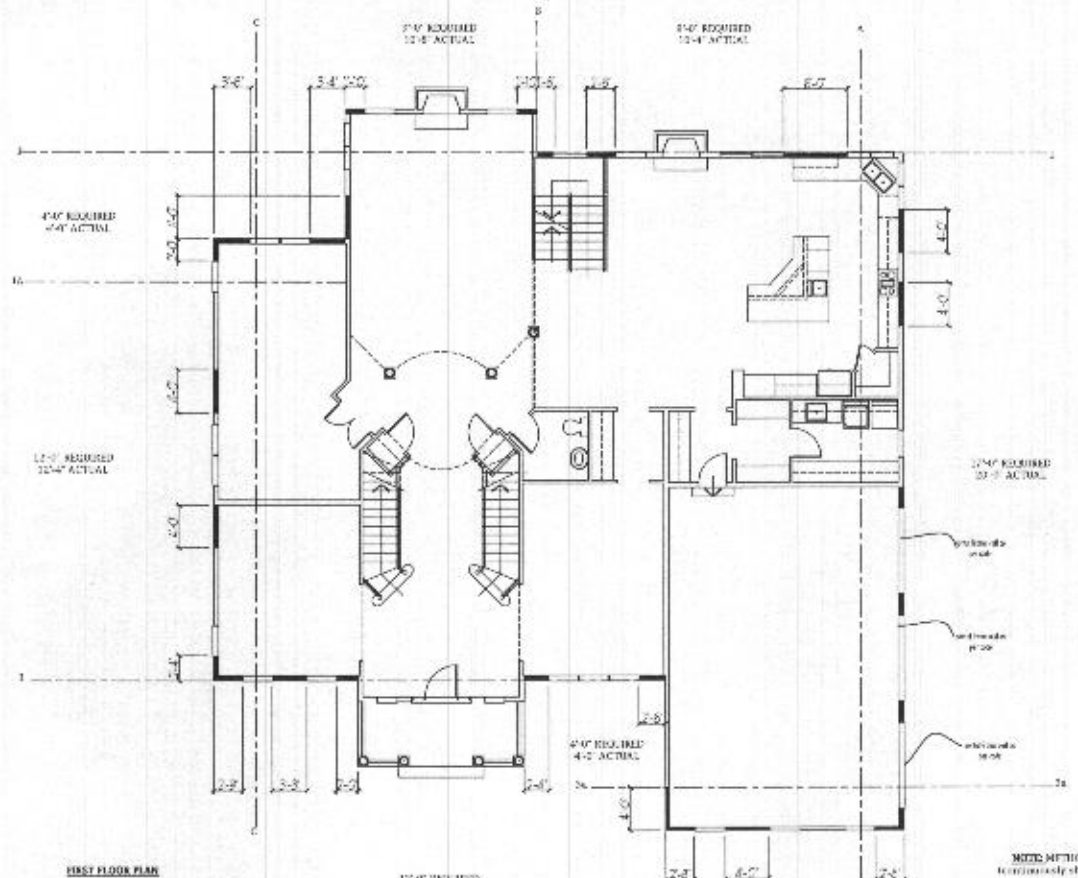
NOTE:
WALL BRACING
ALL EXTERIOR WALLS SHALL BE BRACED IN ACCORDANCE WITH THIS SECTION. IN ADDITION TO THE BRACED WALL LINES SHALL BE PROVIDED IN ACCORDANCE WITH SECTION 902.01.1 FOR BUILDINGS IN SEISMIC DESIGN CATEGORIES II AND III. WALLS SHALL BE CONSTRUCTED IN ACCORDANCE WITH THE ADDITIONAL REQUIREMENTS OF 902.01.3, 902.01.7 AND 902.01.8.
BRACED WALL LINES SHALL CONSIST OF BRACED WALL PANELS. CONSTRUCTION METHODS IN ACCORDANCE WITH SECTION 902.01.3. THE HEIGHT AND LOCATION OF BRACING SHALL BE IN ACCORDANCE WITH TABLE 902.01.1 AND THE HEIGHT OF BRACING SHALL BE THE GREATER OF THAT REQUIRED BY THE SEISMIC DESIGN CATEGORY OR THE JOIST SPACING. BRACED WALL PANELS SHALL BEGIN NO MORE THAN 20" FROM EACH END OF A BRACED WALL LINE. BRACED WALL PANELS THAT ARE LOCATED AS PART OF A BRACED WALL LINE, EXCEPT THAT OFFSETS OUT-OF-PLANE OF UP TO 4 FEET (1219 MM) SHALL BE PERMITTED PROVIDED THAT THE TOTAL CUT-OUT OFFSET DIMENSION IN ANY BRACED WALL LINE IS NOT MORE THAN 5 (127 MM). ADDITIONAL BRACING SHALL BE PROVIDED IF THE BRACING BEINGS MORE THAN 2 (508 MM) FROM EACH END OF A BRACED WALL LINE.
902.01.1 BRACING
BRACING OF BRACED WALL LINES SHALL NOT EXCEED 16 (406 MM) IN LENGTH IN BOTH THE LONGITUDINAL AND TRANSVERSE DIRECTIONS IN EACH STORY.
BRACING OF BRACED WALL LINES NOT EXCEED 16 (406 MM) IN LENGTH IN BOTH THE LONGITUDINAL AND TRANSVERSE DIRECTIONS IN EACH STORY.
BRACING OF BRACED WALL LINES NOT EXCEED 16 (406 MM) IN LENGTH IN BOTH THE LONGITUDINAL AND TRANSVERSE DIRECTIONS IN EACH STORY.
1. THE WALL BRACING PROVIDED SHALL BE OR EXCEED THE AMOUNT OF BRACING REQUIRED BY TABLE 902.01.1 MULTIPLIED BY A FACTOR EQUAL TO THE BRACED WALL LINE BRACING INDEX BY 25, AND
2. THE LENGTH TO WIDTH RATIO SHALL BE 1.0 FOR WALL BRACING DOES NOT EXCEED 31.

NOTE: THIS TABLE IS FOR BRACING OF WALLS BY MEANS OF A BRACED WALL PANEL. BRACING OF WALLS BY MEANS OF A BRACED WALL PANEL SHALL BE PROVIDED IN ACCORDANCE WITH THIS SECTION. BRACING OF WALLS BY MEANS OF A BRACED WALL PANEL SHALL BE PROVIDED IN ACCORDANCE WITH THIS SECTION. BRACING OF WALLS BY MEANS OF A BRACED WALL PANEL SHALL BE PROVIDED IN ACCORDANCE WITH THIS SECTION.

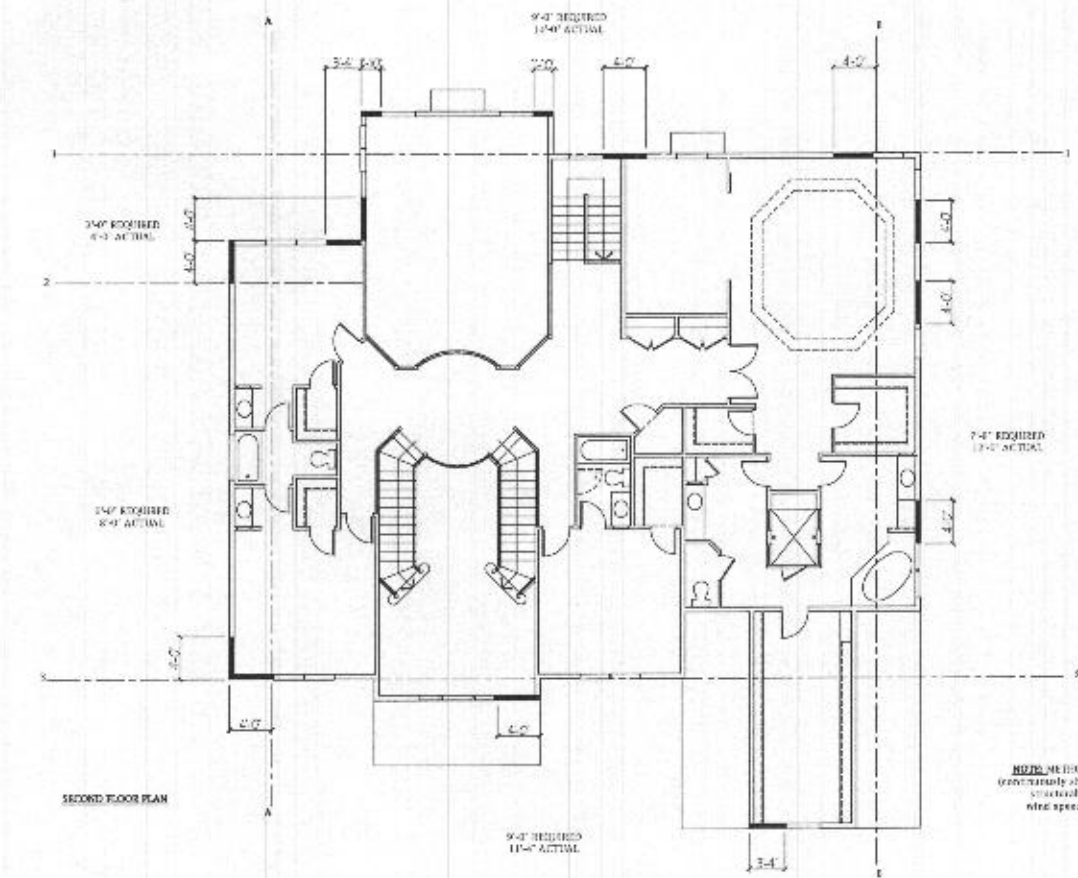
WALL HEIGHT (FEET)	MINIMUM LENGTH OF BRACED WALL PANEL (FEET)						MINIMUM OPENING HEIGHT (FEET)
	40	54	60	66	72	78	
10	40	54	60	66	72	78	100%
12	32	36	40	44	48	52	85%
14	24	27	30	33	36	39	65%



ALL BRACED WALL PANELS SHALL BE THE ORIGINAL MANUFACTURER'S ATTACHED TO THE BRACED WALL PANELS BY MEANS OF A BRACED WALL PANEL. BRACING OF WALLS BY MEANS OF A BRACED WALL PANEL SHALL BE PROVIDED IN ACCORDANCE WITH THIS SECTION. BRACING OF WALLS BY MEANS OF A BRACED WALL PANEL SHALL BE PROVIDED IN ACCORDANCE WITH THIS SECTION.



FIRST FLOOR PLAN



SECOND FLOOR PLAN

REVISED 6/17

Plymouth Road Architects
640 Plymouth Road, Catonsville, MD 21229 410-788-0281

DATE	REVISION

Date: 5/15
Scale: N.A.
Drawn: TIM

Drawing: SHEAR WALL DETAILS
Project: WILLIAMSBURG GROUP
THE RUTLEDGE ESTATE HOME

1067 RE
Project No.

