

DEC 03 2020

PERMIT NUMBER: B20004292

DATE ACCEPTED:

LICENSES & PERMITS DIVISION

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: 18435 Hidden Creek Way
City: Mount Airy
Subdivision/Village/Complex Name: Windsor Forest Knolls
Lot: 10 Tax Map: 6, Grid 16 Parcel: 57

DESCRIPTION OF WORK REQUIRED

Existing Use: Vacant unimproved lot Proposed Use: SFD Estimated Cost: \$386,850.00
Trade Work to Be Completed (Separate Permits Required): Mechanical (HVACR) Electrical Plumbing None

Residential New Single Family Dwelling (Detached)

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): Sonshine MD, LP Primary Residence: Yes No
Owner's Street Address: 227 Granite Run Drive, Suite 100
City: Lancaster State: PA Zip Code: 17601
Phone: (717) 464-9060 Email: billb@keystonecustomhome.com

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: Keystone Custom Homes Contact Name: Gregg Reinsmith
Street Address: 227 Granite Run Drive, Suite 100
City: Lancaster State: PA Zip Code: 17601
Phone: (717) 719-1362 Email: greinsmith@keystonecustomhome.com

CONTRACTOR INFORMATION REQUIRED

Business Name: Keystone Custom Homes License #: MHBR# 2937 (exp 12/01/2021)
Licensee's Name:
Street Address: 227 Granite Run Drive, Suite 100
City: Lancaster State: PA Zip Code: 17601
Phone: (717) 719-1362 Email: greinsmith@keystonecustomhome.com

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: Paul B. Elser, P.E. Name: Paul Elser
Street Address: 227 Granite Run Drive, Suite 100
City: Lancaster State: PA Zip Code: 17601
Phone: (717) 719-1370 Email: pelser@keystonecustomhome.com

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: Covington Heritage
# of Bedrooms (SF): 5 # of efficiency units (MF\*): # of 1 BR (MF\*): # of 2 BR (MF\*): # of 3 BR (MF\*):
# Rooms: 22 # Full Baths: 4 # Half Baths: 1 # Fireplaces: 0
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: 40 1st Fl Depth: 58 2nd Fl Width: 40 2nd Fl Depth: 52 Bsmt Width: 40 Bsmt Depth: 58
Energy Method: Prescriptive Performance UA Alternative ERI Gross Area: 5,679 sq ft Occupiable Area: 5,510 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 12/1/2020

FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS: PR DPZ DED Health SHA CID
SUBMITTAL FEES: \$150.00 PAYMENT: CH# 2091 ACCEPTED BY: MAIL

RECEIVED

PERMIT NUMBER: B 21000859

DATE ACCEPTED:

MAR 09 2021

**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

LICENSES & PERMITS DIVISION

**BUILDING SITE ADDRESS REQUIRED**

Street Address: 18435 Hidden Creek Way Unit:  
 City: Mt Airy State: MD Zip Code: 21771  
 Subdivision/Village/Complex Name: SDP/WP/BA #:  
 Lot: 10 Tax Map: Parcel: Grading Permit #:

**DESCRIPTION OF WORK REQUIRED**

Existing Use: Proposed Use: Estimated Cost: \$ 4081.00  
 Trade Work to Be Completed (Separate Permits Required):  Mechanical (HVACR)  Electrical  Plumbing  None  
 Install 6600 Gallon Propane tank run line to house

**PROPERTY OWNER INFORMATION REQUIRED**

Owner(s) Name(s) (As it appears on tax records): Jason Torres Primary Residence:  Yes  No  
 Owner's Street Address: 18435 Hidden Creek Way  
 City: Mt Airy State: MD Zip Code: 21771  
 Phone: Email:

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

Business Name: Dixieland Energy Contact Name: Konnic Blankenbeckler  
 Street Address: 281 E Main St  
 City: Rising Sun State: MD Zip Code: 21911  
 Phone: 888-517-3680 Email: kdugger@dixielandenergy.com

**CONTRACTOR INFORMATION REQUIRED**

Business Name: Dixieland Energy License #: 201000100429  
 Licensee's Name: Basil Stephen Perry  
 Street Address: 281 E Main St  
 City: Rising Sun State: MD Zip Code: 21911  
 Phone: 888-517-3680 Email: kdugger@dixielandenergy.com

**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  
 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:  Prescriptive  Performance  UA Alternative  ERI Gross Area: sq ft Occupiable Area: sq ft

**AGREEMENT/ DISCALIMER REQUIRED**

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*Basil Stephen Perry* 3-2-21  
 APPLICANT'S ORIGINAL SIGNATURE DATE SIGNED

**FOR OFFICE USE ONLY CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY**

AGENCIES REQUIRED/APPROVALS:  
 PR  DPZ  DED  Health *RH* 3/26/21  SHA  CID  
 SUBMITTAL FEES: \$110.00 PAYMENT: CK# 13166 ACCEPTED BY: MAIL



HEALTH DEPT  
B20004292



FRONT ELEVATION  
SCALE: 1/8" = 1'-0"



\*Professional Certification I hereby certify that these documents were prepared or approved by me, and that I am a fully licensed professional engineer under the laws of the State of Maryland. License No. 35478, Expiration Date 05-18-2027.

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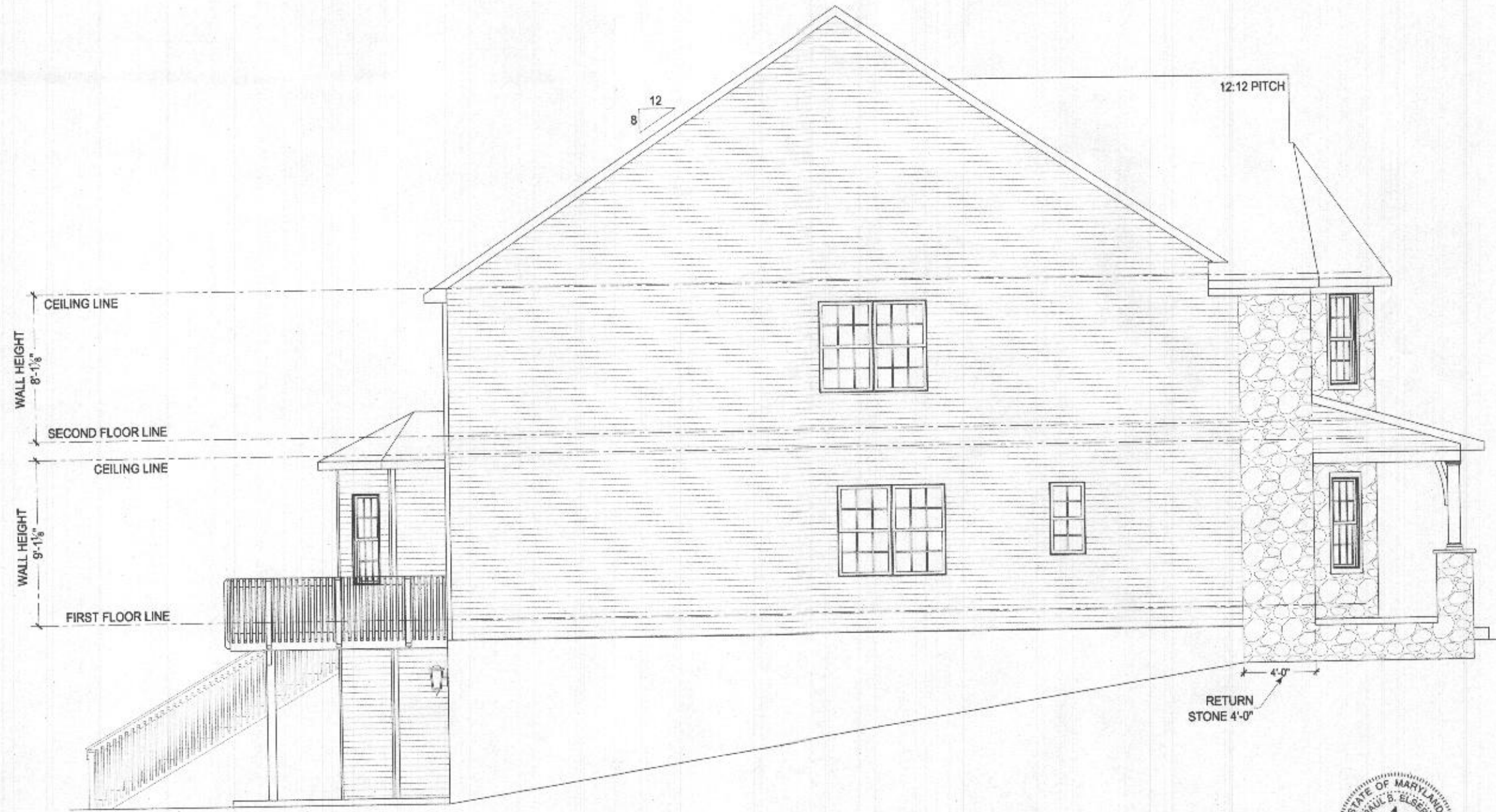
227 GRANITE RUN DRIVE, SUITE 100  
LANCASTER, PENNSYLVANIA 17601  
PH: (717) 464-9060 • FAX: (717) 464-9046  
www.KeystoneCustomHomes.com



KEYSTONE CUSTOM HOMES, INC.

PROJECT:	FRONT ELEVATION
DATE:	AUG 27 2020
SCALE:	AS NOTED
DRAWN BY:	E WEAVER
CHECKED BY:	WAITE / TORRES
SHEET NO.:	A1.0
PLANS:	a c v 20

18435 HIDDEN CREEK WAY  
MT AIRY, MD



LIVING SIDE ELEVATION  
SCALE: 1/4" = 1'-0"



\*Professional Seal call on. I hereby certify that these documents were prepared or approved by me and that I am a duly licensed professional engineer under the law of the State of Maryland. License No. 25478, Expiration Date 06-15-2007

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www.keystonecustomhomes.com



KEYSTONE CUSTOM HOMES, INC.

PROJECT DESCRIPTION	LIVING SIDE ELEVATION
MODEL	EA-010
DESIGNED BY	WAITE / TORRES
DATE	AUG 27 2000
SCALE	AS NOTED
DRAWN BY	E. WEAVER
DATE	ALL
FIGURE	acv 20

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 www.keystonecustomhomes.com



KEYSTONE CUSTOM HOMES, INC.

PROJECT: REAR ELEVATION  
 MODEL: EAS010  
 DRAWN BY: WAITE / TORRES

DATE: AUG 27 2020  
 SCALE: AS NOTED  
 DRAWN BY: E. WEAVER

PROJECT NO: A1.2  
 DRAWN: a c v 20



I, the undersigned, do hereby certify that the drawings were prepared by me, or under my direct supervision and that I am a duly licensed professional engineer under the laws of the State of Maryland. License No. 35478, Expires 06-10-2022.



REAR ELEVATION  
 SCALE 1/4" = 1'-0"

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 www.keystonecustomhomes.com



KEYSTONE CUSTOM HOMES, INC.



GARAGE SIDE ELEVATION  
 SCALE: 1/4" = 1'-0"



Professional Certificate, I hereby certify the above 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. 35478, Expiration Date 05-18-2025

PROJECT DESCRIPTION	GARAGE SIDE ELEVATION
MODEL	EAs010 WAITE / TORRES
DATE	AUG 27 2020
SCALE	AS NOTED
DESIGNED BY	E. WEAVER
SHEET NO.	A1.3
PAGE	8 OF 20

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