

CB210726

PERMIT NUMBER: B 21004700 DATE ACCEPTED:

DILP 2021 DEC 7 4:28:25

**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: **15897 A.E. Mullinix Rd** Unit: \_\_\_\_\_  
 City: **Woodbine** State: **MD** Zip Code: **21797**  
 Subdivision/Village/Complex Name: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grading Permit #: \_\_\_\_\_

**DESCRIPTION OF WORK REQUIRED**

Existing Use: **SFD** Proposed Use: **Sunroom** Estimated Cost: **\$55,000.00**  
 Trade Work to Be Completed (Separate Permits Required):  Mechanical (HVACR)  Electrical  Plumbing  None

**16 x 12 Sunroom with Stairs to Grade, Add 2 "A" Gables to Existing Roofs**

**PROPERTY OWNER INFORMATION REQUIRED**

Owner(s) Name(s) (As it appears on tax records): **Drew & Cathy Hakun** Primary Residence:  Yes  No  
 Owner's Street Address: **15897 A.E. Mullinix Rd**  
 City: **Woodbine** State: **MD** Zip Code: **21797**  
 Phone: **(410) 245-8930** Email: \_\_\_\_\_

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

Business Name: \_\_\_\_\_ Contact Name: **Nick Fochios**  
 Street Address: **2375 Duvall Rd**  
 City: **Woodbine** State: **MD** Zip Code: **21797**  
 Phone: **(410) 489-4446** Email: **myersremodelingco@yahoo.com**

**CONTRACTOR INFORMATION REQUIRED**

Business Name: **Myers Remodeling Co., LLC**  
 Licensee's Name: **Wayne Myers** License #: **122502**  
 Street Address: **2375 Duvall Rd**  
 City: **Woodbine** State: **MD** Zip Code: **21797**  
 Phone: **(410) 489-4446** Email: **myersremodelingco@yahoo.com**

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

Business Name: **Kapital Drafting, LC** Name: **Gary Rosewig**  
 Street Address: **4130 Hpm Dale Rd**  
 City: **Sykesville** State: **MD** Zip Code: **21784**  
 Phone: **(443) 974-4946** Email: **sales@kapitaldrafting.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:  NEPA 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): **4** # of efficiency units (MF\*): \_\_\_\_\_ # of 1 BR (MF\*): \_\_\_\_\_ # of 2 BR (MF\*): \_\_\_\_\_ # of 3 BR (MF\*): \_\_\_\_\_  
 # Rooms: **10** # Full Baths: **3** # Half Baths: **1** # Fireplaces: **1**  
 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: **192** sq ft Occupiable Area: **192** sq ft

**AGREEMENT/ DISCLAIMER 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: *Nick Fochios* DATE SIGNED: **12/4/21**

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

AGENCIES REQUIRED/APPROVALS:  
 PR  DPZ  DED  Health  SHA  CID

SUBMITTAL FEES: **\$25.00** PAYMENT: \_\_\_\_\_ ACCEPTED BY: *[Signature]*

**\$100.00 - 18032** *payable from line 1*

T:\Operations\UpdatedForms\ResidentialBuildingPermitApp01.28.2020

PLANS RECEIVED

DEC 9 2021



HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
7125 Riverwood Drive, Suite D2 ■ Columbia, Maryland 21043 ■ 410-313-2433

Robert J. Frances, P.E., Director

FAX 410-313-3322  
TDD 410-313-2323

**NOTICE OF VIOLATION – STOP WORK ORDER**  
OCTOBER 5, 2021

ANDREW G HAKUN  
CATHY JUNE HAKUN T E  
15897 A E MULLINIX ROAD  
WOODBINE MD 21797-8141

SUBJECT: CB210726, CE210739 AND CM210740  
15897 AE MULLINIX ROAD  
NEW ROOF AND ADDITION

Dear ANDREW G HAKUN & CATHY JUNE HAKUN:

Pursuant to Section 115 of the Howard County Building Code, 2018 International Building Code (IBC) you are hereby ordered to cease all work at the above referenced location. A Stop Work Order was posted at the property on **OCTOBER 5, 2021**. A new roof and addition are under construction without the required permits or inspections which is in violation of the 2018 International Building Code (IBC), Sections 105 and 110.

You are hereby directed to obtain all required permits and inspections or remove the unauthorized structure.

Please contact the License and Permit Division at 410-313-2455 Option #4 for information on permit filing. A work without permit fee of \$100 will be assessed in addition to all required permit fees for commencing work prior to obtaining permits.

*All violations, including obtaining the required permits and inspections or removal of the unauthorized structure, must be corrected in order to prevent any further enforcement action. The proper permits must be obtained by NOVEMBER 1, 2021. Failure to correct the violations by the inspection date may result in legal action being taken against you, including the issuance of a civil citation with a minimum fine of \$250 a day for each day the violations are not corrected.*

If you have any questions regarding the above matter, contact RODNEY MARSHALL, Building Inspector, Monday through Friday between 7:30 and 9:00 a.m. at 410-313-1812.

Sincerely,  
INSPECTIONS AND ENFORCEMENT DIVISION

*Rodney Marshall*  
RODNEY MARSHALL, Building Inspector  
[romarshall@howardcountymd.gov](mailto:romarshall@howardcountymd.gov)

1009a-StopWorkNoPermits.doc, Rev. 11/06, 12/06, 6/08, 5/10, 10/10, 7/12, 6/15, 3/21  
Inspector File  
Town Huskies  
Tracker File  
Legal File

Howard County Government, Calvin Ball County Executive

[www.howardcountymd.gov](http://www.howardcountymd.gov)

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

Date: 2-3-22  
To: Dan Swinder / DPZ Health Dept  
(Person's Name and Division) 410-489-4446  
From: MYERS REMODELING Co. (310) 995-5941  
(Your Name, Company Name and Telephone Number)  
Subject: Project name \_\_\_\_\_  
Project site address 15897 A.E. MULLINIX RD  
Permit # B21004700 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 SITE PLAN (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 \_\_\_\_\_

**Contact Person Information: (Required)**

Nick Fochios  
Please Print Name

Telephone No: 310-995-5941

E-Mail Address: MYERSREMODELINGCO  
@YAHOO.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 [Signature]

DILP 2022 FEB 3 AM 10:33

