



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: 5/9/14

Permit No.: B140015B

Building Address: 12401 Stella Dr
City: Highland State: md Zip Code: 20777
Suite/Apt. #: SDP/WP/BA #:
Census Tract: Subdivision: Fulton Manor
Section: Area: Lot: 6
Tax Map: 40 Parcel: 205 Grid: 6
Zoning: Map Coordinates: Lot Size: 1.283@

Existing Use: SFD
Proposed Use: SFD w/ Propane Tank
Estimated Construction Cost: \$ 8000
Description of Work: SFD
install 300 gallon in-ground propane tank

Occupant or Tenant:
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name:
Address: owner
City: State: Zip Code:
Phone: Fax:
Email:

Property Owner's Name: Grant Gibson
Address: 5920 Great Star Dr
City: Clarksburg State: md Zip Code: 21029
Phone: Fax:
Email:

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: Jeremy Clancy
Address: PO Box 1253
City: Eldersburg State: md Zip Code: 21784
Phone: 410-340-1229 Fax:
Email: Jeremy@AppliedandApproved.com

Contractor Company: Valley National Cris
Contact Person: William Crenney
Address: 7201 Montecarlo Rd
City: Jessup State: md Zip Code: 20794
License No.: 67793
Phone: 410-779-1114 Fax:
Email:

Engineer/Architect Company:
Responsible Design Prof.:
Address: CORT
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:
	2 nd floor:
Area of construction (sq. ft.):	Basement:
	<input type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
Construction type:	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	Multi-family Dwelling
<input type="checkbox"/> Masonry	No. of efficiency units:
<input type="checkbox"/> Wood Frame	No. of 1 BR units:
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
Roadside Tree Project Permit	Footings:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Utilities
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
Sprinkler System:
<input 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:
Email Address: Jeremy@AppliedandApproved.com
Title/Company: permy

Print Name: Jeremy Clancy
Date: 5/9/14

LICENSES & PERMITS
DIVISION

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	5/28/14	

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	\$
Permit Fee	\$ 100.00
Tech Fee	\$ 10.00
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ 110.00
Sub-Total Paid	\$
Balance Due	\$
Check	# 3640

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



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: 3/26/14

Permit No.: B14000878

Building Address: 12401 Stella Dr.
City: Fulton State: MD Zip Code: 20759
Suite/Apt. # SDP/WP/BA #: GP 13-073
Census Tract: Subdivision: Fulton Manor II
Section: Area: Lot: 6
Tax Map: 40 Parcel: 205 Grid: 6
Zoning: RR-DEO Map Coordinates: Lot Size: 55,912

Existing Use: Vacant Lot
Proposed Use: SFD
Estimated Construction Cost: \$ 337,940
Description of Work: 2 story, 2 car garage, full basement,
fire place, 8 rooms, 4 bed rooms, 3 full baths, 1 half baath

Occupant or Tenant:
Was tenant space previously occupied? Yes No
Contact Name:
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:	1st floor:
	2nd floor:
Area of construction (sq. ft.):	Basement:
	<input type="checkbox"/> Finished Basement
Use group:	<input checked="" type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
Construction type:	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: 4
<input type="checkbox"/> Structural Steel	Multi-family Dwelling
<input type="checkbox"/> Masonry	No. of efficiency units:
<input type="checkbox"/> Wood Frame	No. of 1 BR units:
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
Roadside Tree Project Permit	Footings:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: Trinity Quality Homes Inc.
Address: 3675 Park Ave #301
City: Ellicott City State: MD Zip Code: 21043
Phone: 443-535-8516 Fax:
Email:

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

Contractor Company: Trinity Quality Homes Inc
Contact Person: Sherry Mewshaw
Address: 3675 Park Ave #301
City: Ellicott City State: MD Zip Code: 21043
License No.: 699
Phone: 443-535-8516 Fax:
Email: sherry@trinityhomes.com

Engineer/Architect Company:
Responsible Design Prof.:
Address:
City: State: Zip Code:
Phone: Fax:
Email:

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
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:	G13000302
Building Shell Permit Number:	

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Applicant's Signature: Sherry Mewshaw
Email Address: sarah@trinityhomes.com
Trinity Homes - selections coordinator
Title/Company

Print Name: Sherry Mewshaw
Date: 3/25/14

RECEIVED

MAR 26 2014

LICENSES & PERMITS
DIVISION

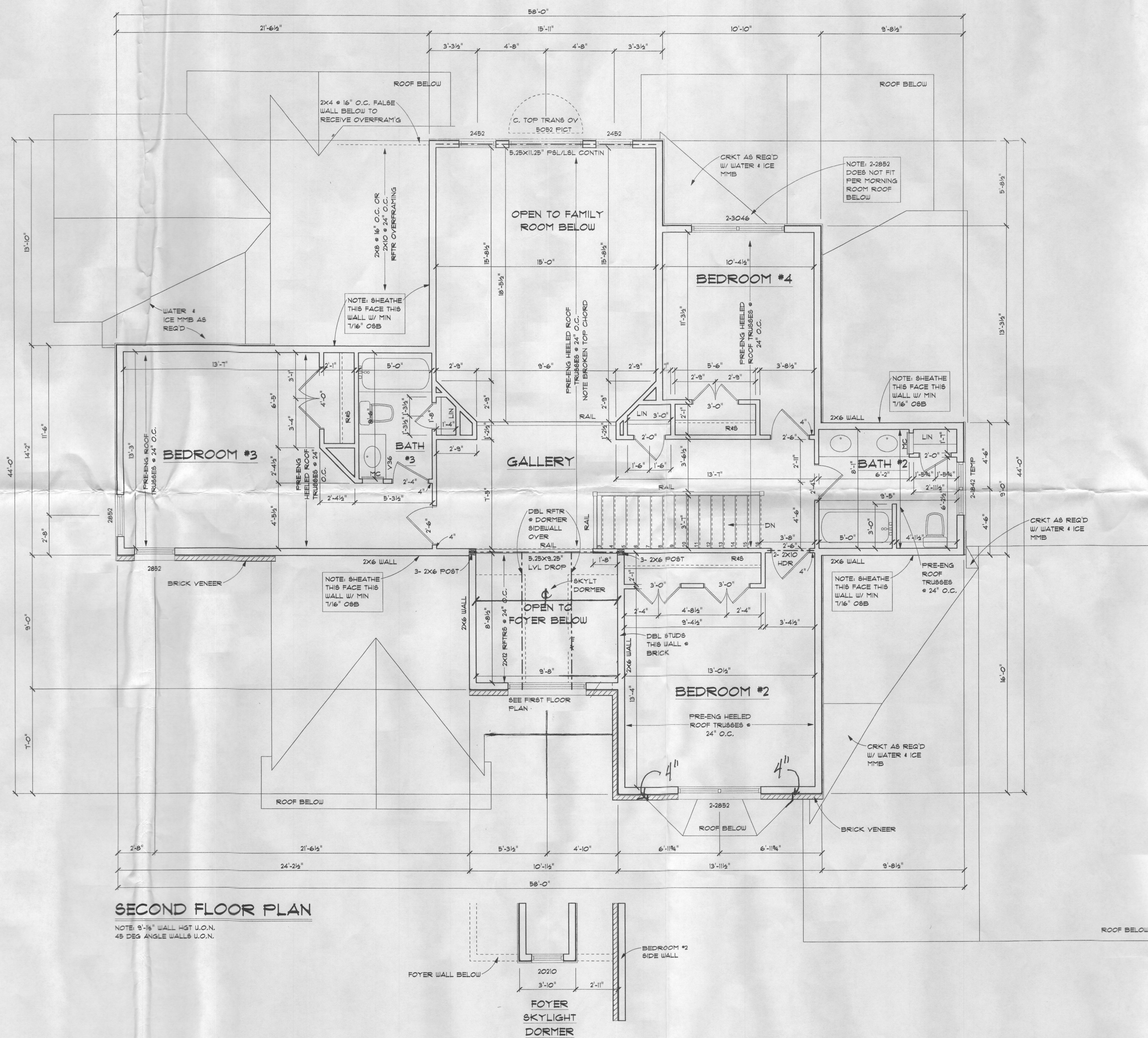
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PLEASE WRITE NEATLY & LEGIBLY
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AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	3/25/14	[Signature]
Is Sediment Control approval required for issuance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START		

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side/St.: 100 100 100
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
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SDP/Red-line approval date:

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Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# 029965

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



FULTON MANOR INTERIOR TRIM PACKAGE

DOORS: 1ST & 2ND FLOORS - FREHUNG MASONITE, RAISED SIX PANEL

DOOR HARDWARE: SATIN NICKEL STOPS, KNOBS, HINGES, AND HANDLES

DOOR TRIM: 1ST & 2ND FLOORS - 3/4" BEADED EDGE CASING, FINGER JOINT

BASE: 1ST & 2ND FLOORS - 5/4" WM-163E

CHAIR RAIL: TWO PIECES WM-302 W/ 4/4" BEADED BOTTOM BACKER IN DINING ROOM

* WOOD EXTENSIONS & CASINGS AROUND ALL WINDOWS EXCEPT IN THE GARAGE

CROWN MOULDING: THREE PIECE 4 5/8" CROWN W/ BEADED BOTTOM BACKER W/ #183 TRIM IN DINING ROOM, MORNING ROOM, SITTING ROOM AND GALLERY

NOTE: CROWN MOULDING NOT POSSIBLE IN LIVING ROOM DUE TO CATHEDRAL CEILING OR FOYER DUE TO VAULTED CEILING

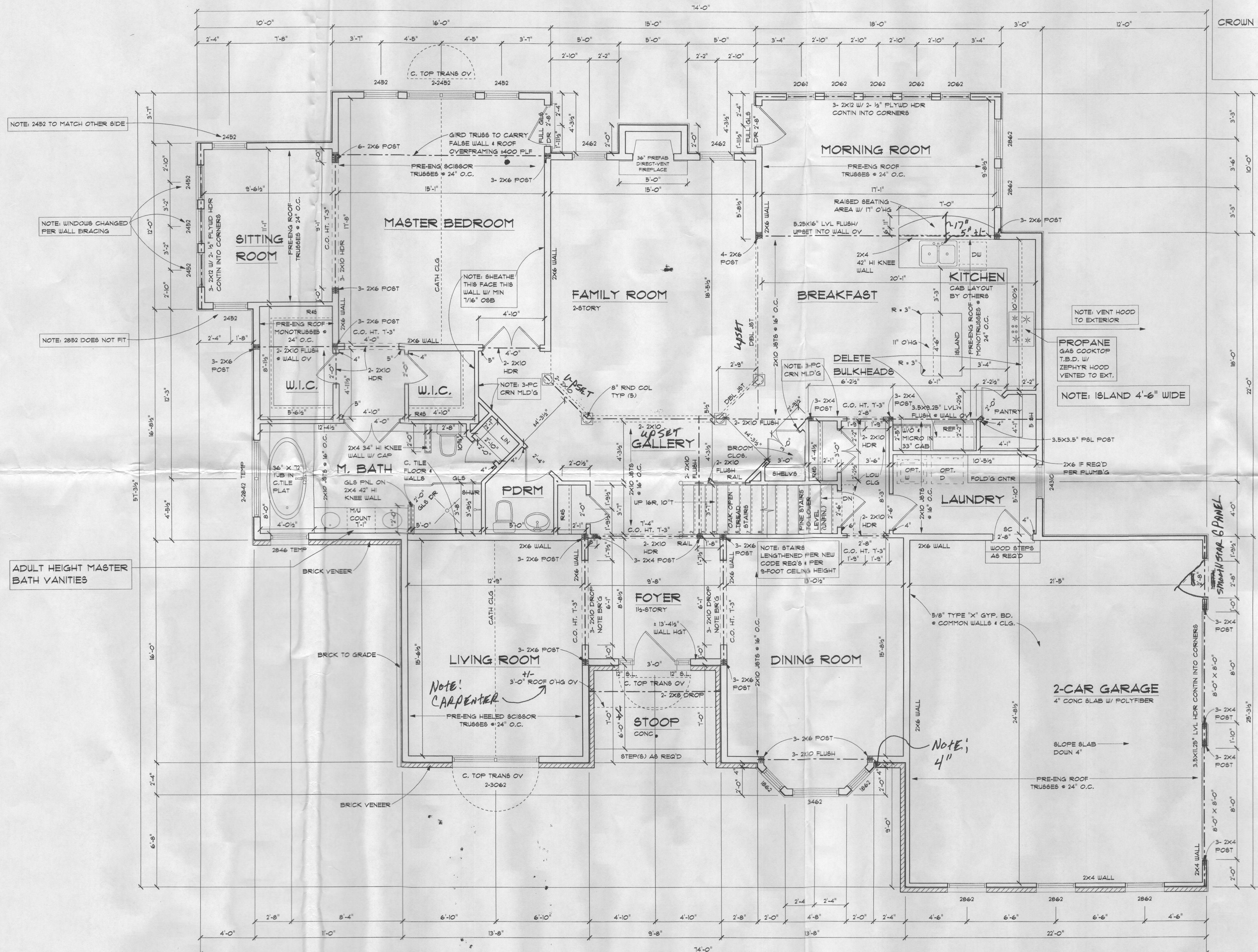
NOTE: CARPENTER ALLOW 4" FOR 3/4" CASING ON 1ST FLOOR & 2ND FLOOR

2 GARAGE DOOR OPENERS
LIFTMASTER 3265

NOTE: 9' CEILINGS U.O.N.
2X6 EXTERIOR WALLS U.O.N.

NOTE: PROPANE → FAMILY ROOM FIREPLACE: LENNOX MILLIVOLT EDV4035 PROPANE PRE ENGINEERED DIRECT VENT FIREPLACE

F.P. ROUGH OPENING, LENNOX MILLIVOLT EDV4035: 41"W x 40 1/2"H x 23"D



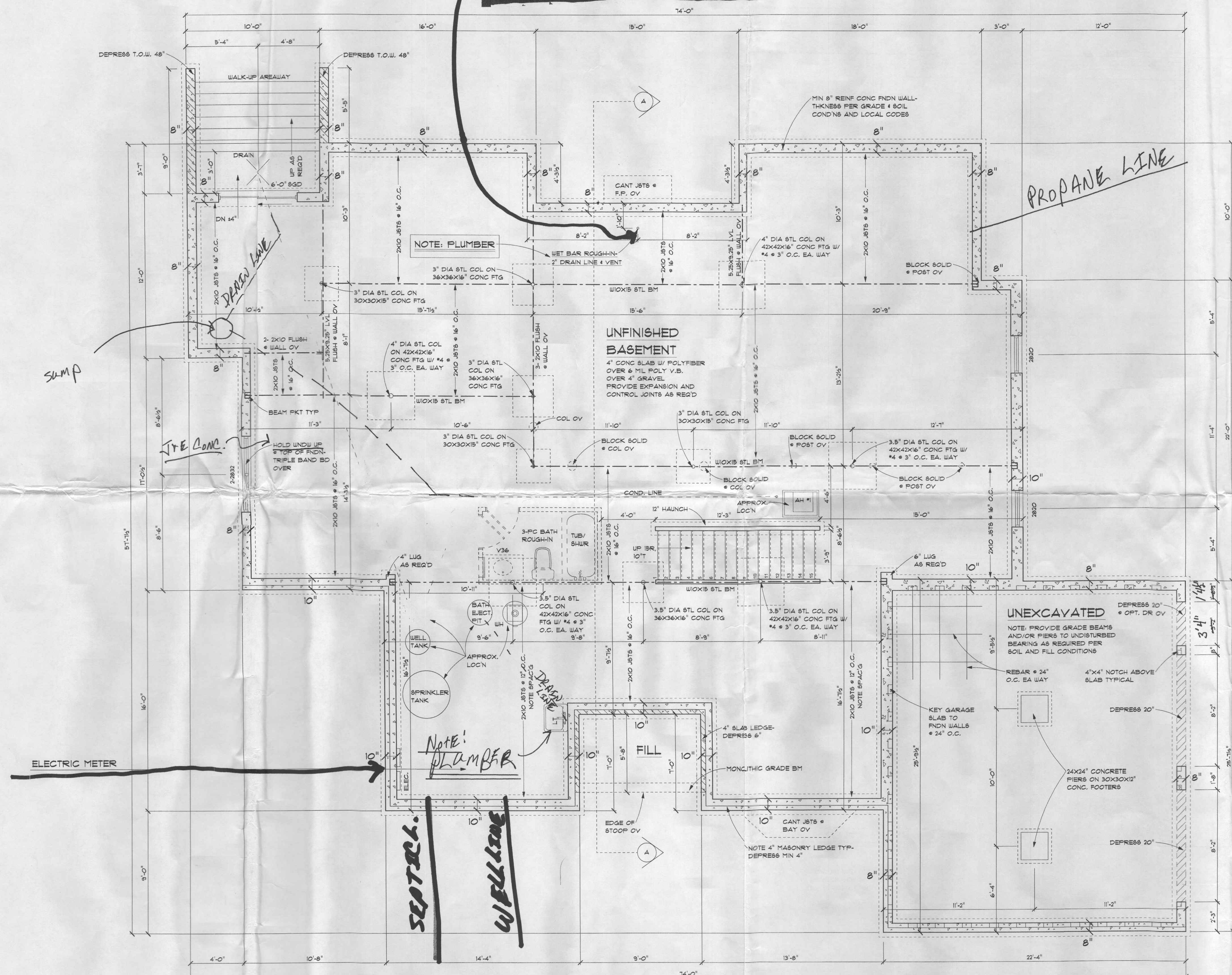
FIRST FLOOR PLAN

NOTE: 9'-1/4" WALL HGT U.O.N.
45 DEG ANGLE WALLS U.O.N.

NOTE: INTERIOR STAIRS SHALL CONFORM TO THE FOLLOWING GEOMETRY:

STRAIGHT:
RISER HEIGHT 7.75" MAX
TREAD DEPTH 10" MIN
NOSING .75" MIN 1.25" MAX
(NOTE: NOSING MAY BE OMITTED *
TREAD DEPTH OF 11" OR GREATER)

NOTE PLUMBER
WET BAR
ROUGH IN



NOTE: PLUMBER
PASSIVE RADON SYSTEM
3" PVC PIPE W/ TEE VENTED
THROUGH ROOF (LOCATION PER
PLUMBER)

HVAC: EQUIPMENT - AMANA
 ZONE 1: 90% EFFICIENCY PROPANE FURNACE WITH 13 SEER A/C UNIT
 ZONE 2: 13 SEER HEAT PUMP

*VENT HOOD TO EXTERIOR

Gas:	Propane
Gas Furnace Zones: <i>PROPANE</i> <i>ZONE 1</i>	YES
<i>Propane</i> Fire Place	YES
Cook Top <i>PROPANE</i>	YES

NOTE: 9' FOUNDATION WALLS

FOUNDATION PLAN

NOTES

1. 2000 PSF SOIL BEARING CAPACITY ASSUMED.
2. BEAMS, JOISTS, HEADERS AND RAFTERS TO BE S-P-F #1/#2 OR EQUAL TYPICAL THROUGHOUT UNLESS OTHERWISE NOTED
3. VERIFY SIZE AND LOCATIONS OF DOORS AND WINDOWS THIS PLAN PER GRADE AND BUILDER



TRINITY QUALITY HOMES INC. T/A

THE WATERFORD

OR AS NOTED

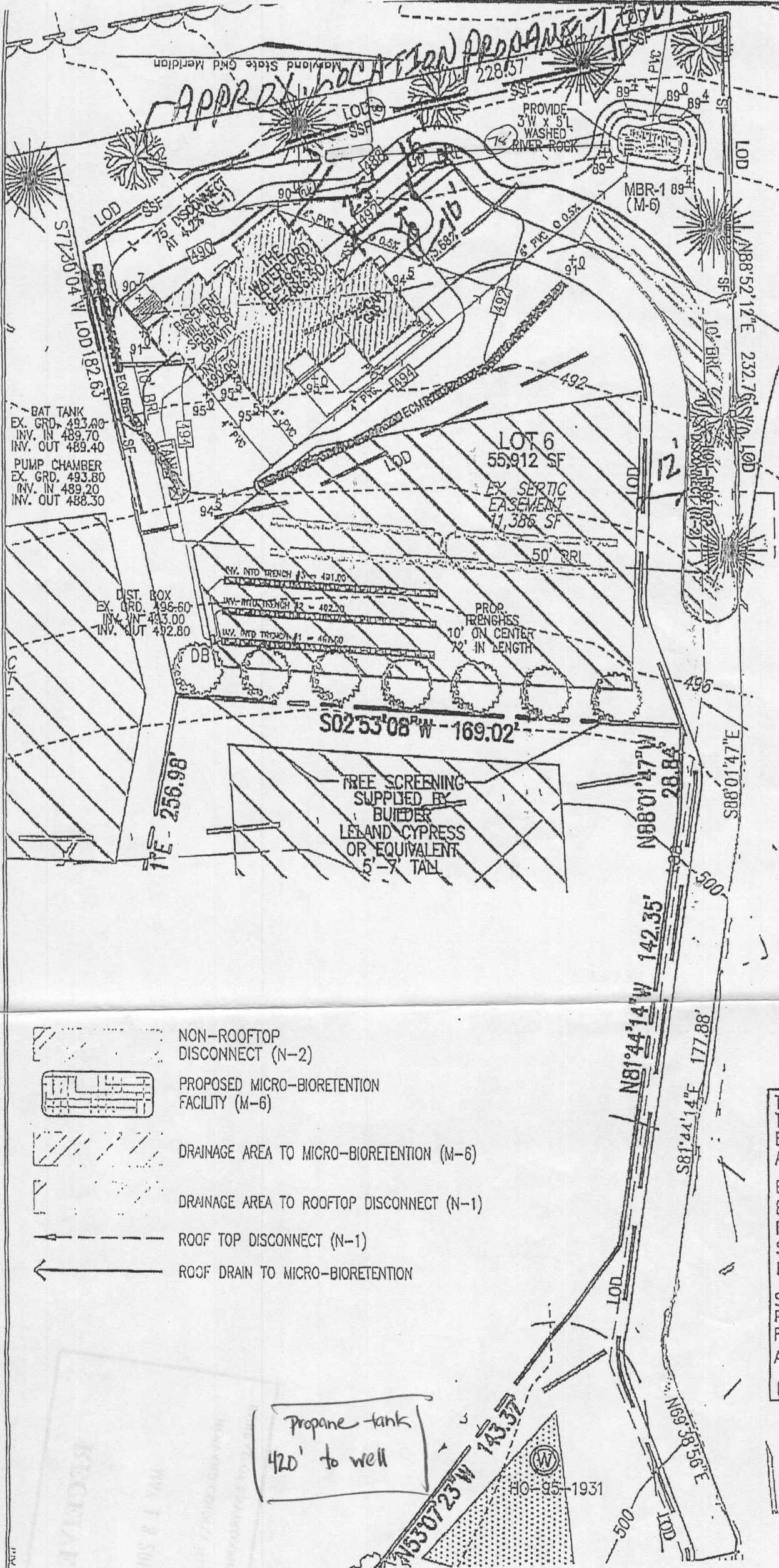
REVISION

DATE 03-20-2014

SHEET NO.

A-3

2012 CODE



1"=40'

12401 Stella Dr

Approved for UPT

B14001503

RA 5/28/14

EADDER ☐

PROPANE CO. ☐

- NON-ROOFTOP DISCONNECT (N-2)
- PROPOSED MICRO-BIORETENTION FACILITY (M-6)
- DRAINAGE AREA TO MICRO-BIORETENTION (M-6)
- DRAINAGE AREA TO ROOFTOP DISCONNECT (N-1)
- ROOF TOP DISCONNECT (N-1)
- ROOF DRAIN TO MICRO-BIORETENTION

THE EXISTING WELL SHOWN ON LOT 6 TAG NO: 95-1931 HAS BEEN FIELD LOCATED BY ROBERT H. VOGEL ENGINEERING, INC., AND IS ACCURATELY SHOWN.

BUILDING OF LOT 6 FLOOR AREAS:

BASEMENT FLOOR AREA: 2120

FIRST FLOOR AREA: 2250

SECOND FLOOR AREA: 1010

BEDROOMS: 4

STORMWATER MANAGEMENT FOR THIS LOT IS PROVIDED BY ONE MICRO-BIORETENTION FACILITY (M-6), ROOFTOP DISCONNECTS (N-1), AND NON-ROOFTOP DISCONNECTS (N-2).

BUILDING PERMIT NO. _____

Propane tank
420' to well

HO-95-1931