



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: 1/16/15

Permit No.: B15000166

Building Address: 15237 Sweetbay St.
City: WOODBINE State: MD Zip Code: 21797
Suite/Apt. # SDP/WP/BA #: F-07-38
Census Tract: Subdivision: BELLE HAVEN
Section: Area: Lot: 39
Tax Map: Parcel: Grid:
Zoning: Map Coordinates: Lot Size:

Existing Use: vacant lot
Proposed Use: new S. F. D.
Estimated Construction Cost: \$ 295,000
Description of Work: colorado w/ morn. RM.
6 Ft. FAM RM. EXT, Conservatory
2 story, Full BSMT. 14 R, 4 SFB
Occupant or Tenant: 1HB, 2FP, 1 GARAGE (4 BR)
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 checked="" 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 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:
<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: BELLE HAVEN BAKER LLC
Address: 10751 Falls Rd. Ste. 405
City: LUTHERVILLE State: MD Zip Code: 21093
Phone: Fax:
Email:

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Vicky Meyer
Address:
City: State: Zip Code:
Phone: 410-296-6900 Fax:
Email: MDBLDGPERMITS@COMCAST.NET

Contractor Company: K. HOVNANIAN HOMES
Contact Person: Chester Willett
Address: 1802 Brightseat Rd.
City: Landover State: MD Zip Code: 20785
License No.: 3149
Phone: 301-772-8900 Fax:
Email: CWillett@KHOV.COM

Engineer/Architect Company: D. D. C.
Responsible Design Prof.: Brian Collins
Address: 192 E. Main St.
City: Westminster State: MD Zip Code: 21157
Phone: 410-386-0560 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 checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	G-13000401
Building Shell Permit Number:	G-13000401

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: V. Meyer

Email Address: MDBLDGPERMITS@COMCAST.NET

AGENT
Title/Company

Print Name: Vicky Meyer
Date: JAN 16 2015

LICENSES & PERMITS

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY DIVISION

PLEASE WRITE NEATLY & LEGIBLY

-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	2/19/14	H. OSWALD

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	\$ 100.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# 00020149

Distribution of Copies: White: Building Officials

Green: PSZA, Zoning

Yellow: PSZA, Engineering

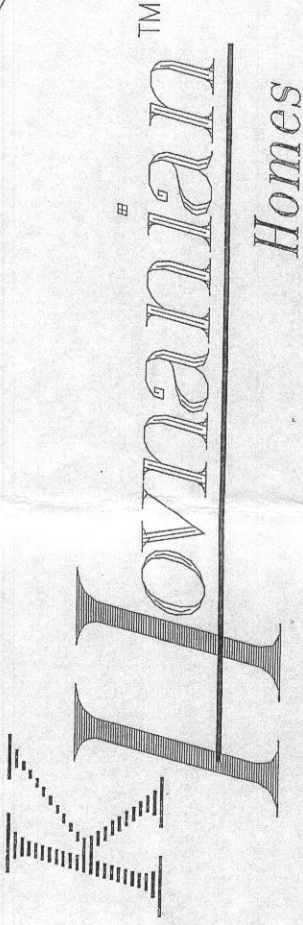
Pink: Health

Gold: SHA

SQUARE FOOTAGE CHART

NAME	AREA
FIRST FLOOR PLAN (TRADITIONAL ELEV.)	1748
SECOND FLOOR PLAN (TRADITIONAL ELEV.)	1708
BASE SQUARE FOOTAGE	3456
COLONIAL ELEVATION	+ 109
COUNTRY ELEVATION	+ 109
GEORGIAN ELEVATION	+ 131
VICTORIAN ELEVATION	+ 162
ELEVATION A	+ 215
ELEVATION B	+ 215
OPT. LIVING RM. / DINING RM BAY WINDOW	+ 16
OPT. SIDE LIBRARY BAY WINDOW	+ 18
ALT. OWNERS SUITE W/ 3-CAR SIDE LOAD GARAGE	+ 5
BEDROOM 5 OVER STD FAMILY ROOM	+ 287
BEDROOM 5 OVER EXT. FAMILY ROOM	+ 395
OPT. SIDE CONSERVATORY	+ 252
OPT. FIRST FLOOR SUITE W/ BATH	+ 331
OPT. FIRST FLOOR SUITE 2 W/ BATH	+ 378
OPT. ALT. FIRST FLOOR SUITE W/ BATH	+ 471
OPT. 6' LIBRARY EXT.	+ 79
OPT. 6' FAMILY ROOM EXT.	+ 120
OPT. 12' MORNING ROOM / DES. KIT. / GRAND MR.	+ 244
OPT. REAR SUNROOM	+ 161
OPT. COMBO 12' MORNING ROOM & 6' F.R. EXT.	(361)
OPT. COMBO 12' MORNING ROOM & 6' F.R. & 6' LIB. EXT.	(440)
OPT. COMBO 12' MORNING ROOM & 6' F.R. & SUNROOM	(519)
OPT. FINISHED BASEMENT (TOTAL BASE HOUSE)	1318
OPT. REC. ROOM	662
OPT. DEN	308
OPT. BATH	49
OPT. EXERCISE ROOM	221
OPT. FINISHED STORAGE CLOSET	79
EXT. REC. RM. W/ 6' LIBRARY EXT.	+ 79
EXT. REC. RM. OPT. 6' FAMILY ROOM EXT.	+ 106
EXT. REC W/ OPT. REAR SUNROOM	+ 153
EXT. REC W/ OPT. 12' MORNING ROOM ONLY	(+ 7)
EXT. DEN W/ OPT. 12' MORNING ROOM	+ 226
EXT. DEN W/ COMBO OPT. 12' MR & 6' FAMILY RM. EXT.	(+ 13)
EXT. REC W/ COMBO OPT. 12' M.R. & 6' F.R. & SUNROOM	(- 5)
EXT. EXERCISE RM. W/ COLONIAL ELEVATION	+ 25
EXT. STORAGE CLOSET W/GEORGIAN ELEVATION	+ 15
EXT. EXERCISE RM. W/ VICTORIAN ELEVATION	+ 25
EXT. EXERCISE RM. W/ ELEVATION A & B	+ 25
EXT. STORAGE CLOSET W/ ELEVATION A & B	+ 7

ACI



MID-ATLANTIC AREA

COLORADO

REVISION DATE: 08-11-2014

1CO

2012 INTERNATIONAL RESIDENTIAL CODE

" THE LOCAL JURISDICTION SHALL FILL IN THIS TABLE WITH LOCAL CLIMATIC AND GEOGRAPHIC CRITERIA "

2012 CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA:

GROUND SNOW LOAD	WIND SPEED Speed (mph)	Topographic Effects	SEISMIC DESIGN CATEGORY	SUBJECT TO DAMAGE FROM		WINTER DESIGN TEMP.	ICE BARRIER UNDERLAMENT REQUIRED	FLOOD HAZARDS	AIR FREEZING INDEX	MEAN ANNUAL TEMP
				Weathering	Frost Line Depth	Termites				
	30		A & B							

CREATE A SIGNATURE PER HOWARD COUNTY CODE 3.8(c)(5)

SQUARE FOOTAGE CHART (CONT'D)

NAME	AREA
GARAGE 2-CAR	
GARAGE 2-CAR (W/ ELEVS A & B)	464
GARAGE 3-CAR SIDE LOAD	+ 42
GARAGE 3RD CAR FRONT LOAD	+ 168
	+ 227
UNFINISHED BASEMENT (BASE HOUSE)	1748
UNFIN. BSMT. W/ COLONIAL ELEVATION	+ 55
UNFIN. BSMT. W/ COUNTRY ELEVATION	+ 55
UNFIN. BSMT. W/ GEORGIAN ELEVATION	+ 22
UNFIN. BSMT. W/ ELEVATION	+ 0
UNFIN. BSMT. W/ 6' LIBRARY EXT.	+ 79
UNFIN. BSMT. W/ OPT. 6' FAMILY ROOM EXT.	+ 114
UNFIN. BSMT. W/ OPT. 12' MORNING ROOM	+ 244
UNFIN. BSMT. W/ OPT. REAR SUNROOM	+ 161
UNFIN. BSMT. W/ COMBO OPT. 12' MR. & 6' FAMILY RM. EXT.	(- 3)
UNFIN. BSMT. W/ COMBO OPT. 12' MR. & 6' F.R. & SUNROOM	(- 6)
UNFIN. BSMT. W/OPT. SIDE CONSERVATORY	+ 252
UNFIN. BSMT. W/OPT. FIRST FLOOR SUITE W/ BATH	+ 331
UNFIN. BSMT. W/OPT. FIRST FLOOR SUITE 2 W/ BATH	+ 378
UNFIN. BSMT. W/ OPT. ALT. FIRST FLOOR SUITE W/ BATH	+ 471

Belz Haven lot 39

Harpin Development

31500066

NOTE: AT ANYTIME IN THE FUTURE THAT A BUILDING PERMIT IS SUBMITTED TO FINISH THE AREA IDENTIFIED AS OPTIONAL DEN, THEN A SEPTIC SYSTEM UPGRADE WILL BE REQUIRED AS FINISHING THE OPTIONAL DEN

COLORADO
KV_003_4A

consent.



FIRST FLOOR PLAN
TRADITIONAL ELEVATION

OPT. LIVING, DINING, BAY WINDOW
SEE DETAILS



OPT. GOURMET KITCHEN



OPT. FULL BATH ILO POWDER ROOM
NOTE: HALL CLOSET N/A W/ FULL BATH OPT.



OPT. ALT GOURMET KITCHEN

OPT. FINISHED LOWER LEVEL PLAN

