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

Date:	December 2, 2021			
То:	Dana Bernard Health Department		epartment	
From:	(Reviewer/Requestor's Name) Kenneth Roethel (Your Name, Company Name)	(Division)	443-226-2788 (Phone Number)	
Subject:	Project name	I Rd, Ellicott City, MD 2		
	B20004285		÷	
Lette Revis Lette Energ Copie	ease 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			
Ken	tact Person Information: (Required) neth Roethel se Print Name	_ Telephone No: _	43-226-2788 kroethel@hotmail.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 <u>IS</u> 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 OPTION #4 OR BY VISITING <u>MYHOWARD.INFO.</u> CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A <u>MINIMUM OF FIVE (5) WORKING DAYS</u> FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

Received by

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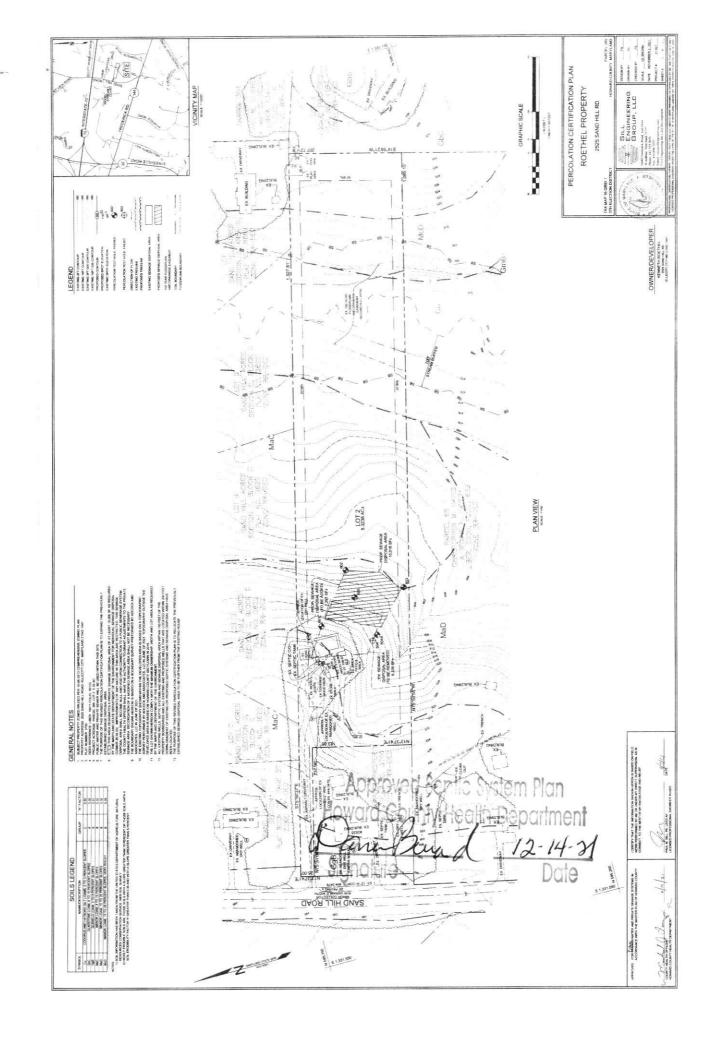
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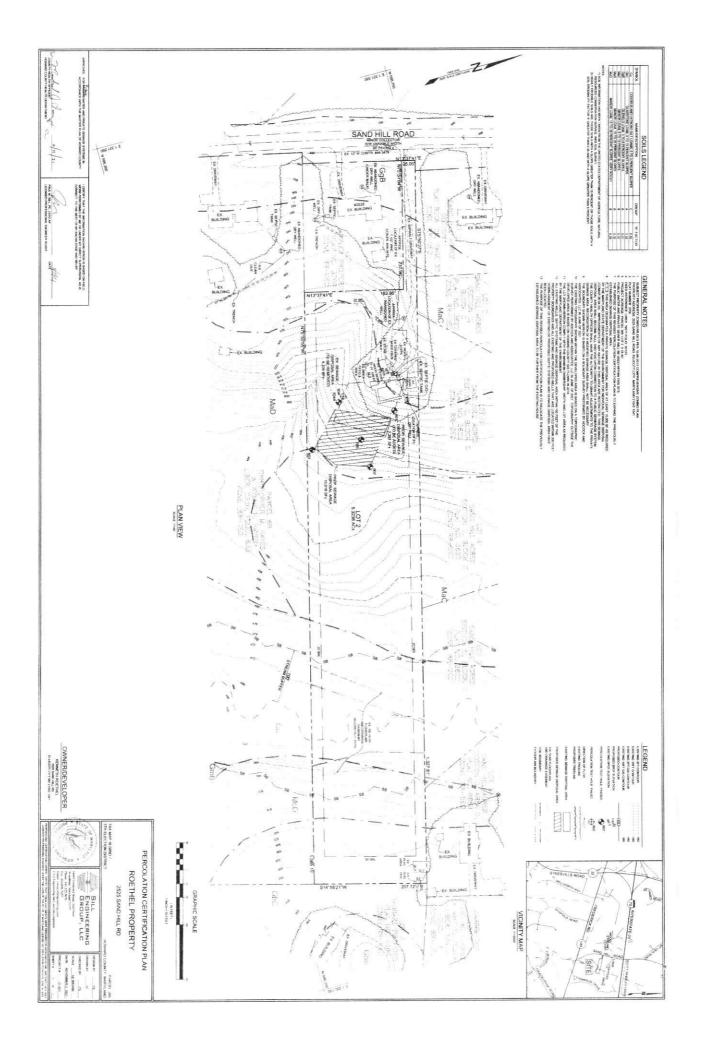
Date:	December 2, 2021				
То:	Dana Bernard	Health Depar	tment		
From:	(Reviewer/Requestor's Name) Kenneth Roethel	(Division)	443-226-2788		
Subject		ill Rd, Ellicott City, MD 2104	(Phone Number)		
	Permit # B20004285	SDP #			
	Other information pertinent to this project	et			
✓ Please check the attachments 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				
	Two sets of single-family model plans to be placed on permanent file: Model Name/ #				
	Other				
	Contact Person Information: (Required)				
	Kenneth Roethel	Telephone No: 443-2	226-2788		
	Please Print Name		thel@hotmail.com		

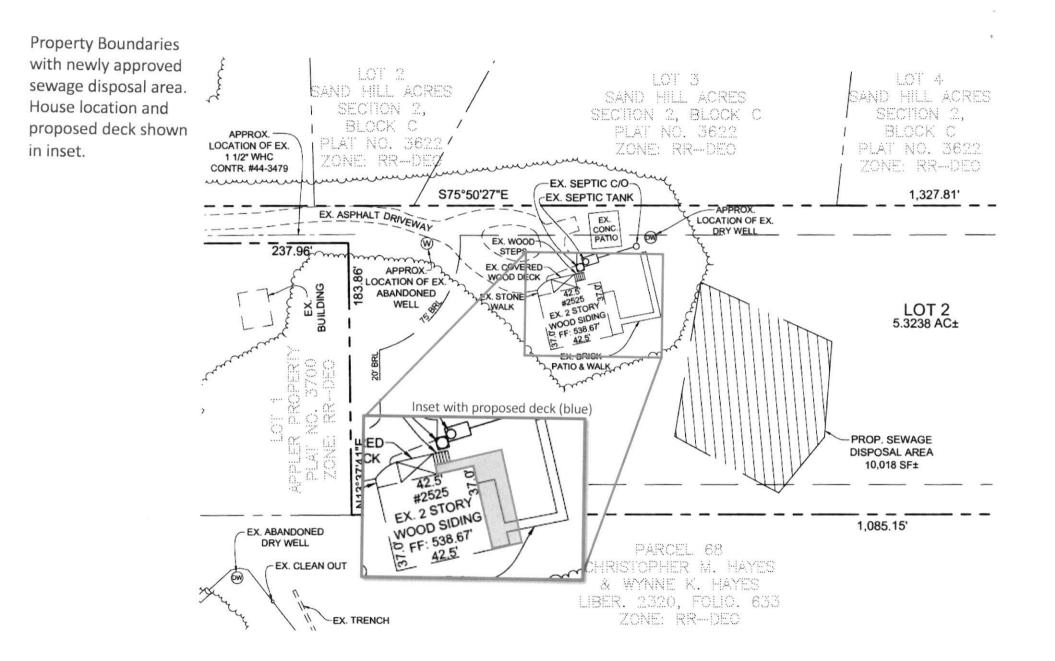
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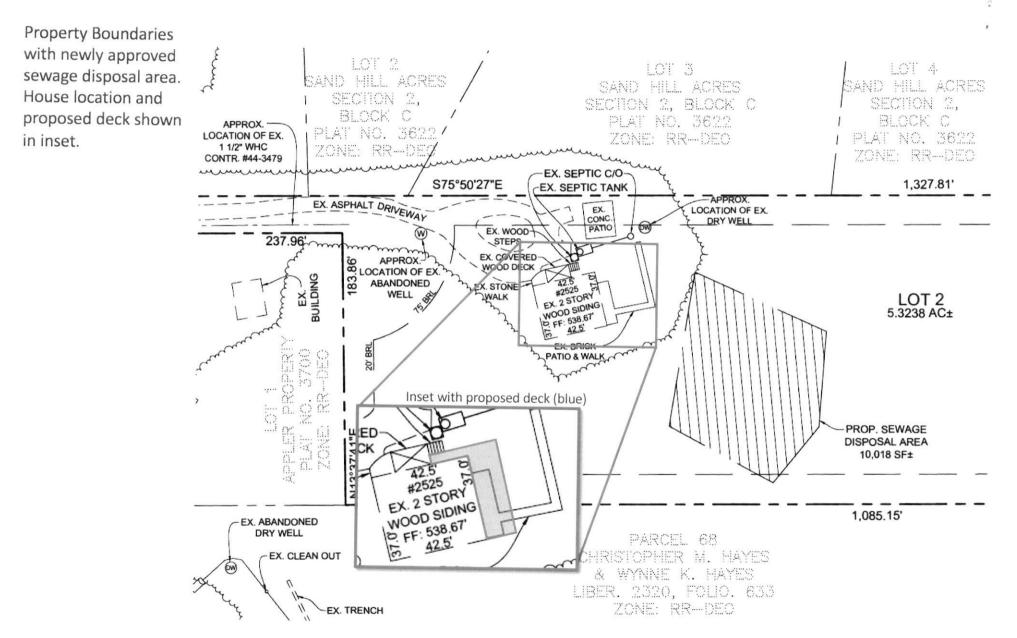
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