

HOWARD COUNTY
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE - ELLICOTT CITY, MD 21043
*** THIS PERMIT MUST BE CONSPICUOUSLY POSTED ON SITE ***

Residential New Single Family Dwelling Permit

PERMIT NUMBER: B21001239

APPLICATION DATE: 4/7/2021

ISSUE DATE: 9/3/2021

SITE ADDRESS:

10500 PUDDING LN
ELLICOTT CITY, MD 21042

PROPERTY OWNER INFO:

TOLL MID ATLANTIC COMPANY LP INC
250 GIBRALTAR RD
HORSHAM, PA 19044
Phone #: 410-872-9105

Subdivision: Carroll-Ziegler Property

Lot No.: PAR K **Tax Map:** 23 **Grid:** 23-18

ADC Map: 4814-J9 **SDP No.:** **Zoning:** RC-DEO **Census Tract:** 602303

DESCRIPTION OF WORK:

SFD/ MODEL 'KALORAMA', 3 STORY, NULL, BASEMENT = FULL FINISHED, 12R, 7FB, 1HB, 1FP, 2 CAR ATTACHED, 7BR, N/A, ENERGY METHOD = PERFORMANCE METHOD, SUBJECT TO CB-76-2018.

PRIMARY CONTRACTOR INFO:

Contractor License No.: 8220

License Address: TOLL MID-ATLANTIC LP COMPANY INC
NATHAN BRANDENBURG

Phone #: 7164 COLUMBIA GATEWAY DRIVE SUITE
230
COLUMBIA, MD 21046
410-872-9105

PRIMARY CONTACT INFO:

Contact Type: CONTACT

TOLL MID-ATLANTIC LP COMPANY INC

7164 COLUMBIA GATEWAY DRIVE SUITE
230
COLUMBIA, MD 21046
Phone #: 410-872-9105

Building/Lot Characteristics

Legal Description: PAR K 97.74 A NONBU[]PUDDING LANE[]CARROLL-ZIEGLER PROP RSB

Existing Use: Vacant Lot

Water Supply: Private

Height: 28

Sewage Disposal: Private

Basement: Full Finished

SF # of Bedrooms: 7

SF # of Full Baths: 7

SF # of Half Baths: 1

Zoning Setback Requirements:

Front - Proposed: 196 **Required:** 50

Rear - Proposed: 78 **Required:** 30

Side - Proposed: 28 **Required:** 10

Side Street - Proposed: n/a **Required:** n/a

Meets Minimum Required Setbacks?: Yes **Lot Coverage for NT Zoning:**

Permit Fees:

Total Fees Invoiced: \$62,255.38

Total Fees Paid: \$62,255.38

Balance Due: \$0.00

To schedule an inspection or check the results of an inspection please call (410) 313-3800

APPROVED BY THE DIRECTOR OF INSPECTIONS, LICENSES AND PERMITS - BUILDING OFFICIAL

Menu

Save

Reset

Cancel

Help

Approved RHC
9/26/2022

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Deck	B22003244	08/19/2022
Description of Work		
SFD/ TO CONSTRUCT 16' X 40' OPEN DECK W/ STEPS TO GRADE AND TREX RAILING (COMPLIANCE CODE ATTACHED) ADDITIONAL SEPARATE 4' X 4' OPEN LANDING W/ STEPS TO GRADE AND TREX RAILING		
check spelling		

Address * (This section is required.)

Search	Reset	Clear	Get Parcel & Owner
Street #	Street Name	Street Type	
10500	PUDDING	LN	
Unit Type	Unit #	X Coordinate	Y Coordinate
--Select--		-76.8824	39.25689
City	State	Zip Code	Primary
ELLICOTT CITY	MD	21042	Yes

Parcel * (This section is required.)

Search	Reset	Clear	Get Address & Owner			
GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
11061255	0148	0	0	0	0	RURAL
Legal Description						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
24	15	602303	5				
Plan Area	State Tax Id	Subdivision Name		Primary			
		Kings Forest		Yes			

Section	Area	Tax Map
		23
Grid	Zoning District	ADC Map
23-24	RC-DEO	4814-J9
SDP No.	Final Plan No.	WP File No.
	ECP-14-046	
Record Plat No.	WS Contract No.	FDP No.
25764-2576		
Owner Occupied	Year Built	Historic District
<input type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Yes <input type="radio"/> No
Historic District Registry No.	Stat Area	Flood Plain
	2-08B	<input type="radio"/> Yes <input checked="" type="radio"/> No
Building No		

Owner * (This section is required.)

Search **Reset** **Clear**

Name *

TOLL BROTHERS

Address Line 1

7164 COLUMBIA GATEWAY DR #230

Address Line 2

Address Line 3

Mail City	Mail State	Mail Zip Code
COLUMBIA	MD ▼	21046
Phone	Primary	
410-872-9105	Yes ▼	
E-mail		

Cell Number	Fax Number

Professionals (This section is not required.)

Search **Reset** **Clear**

License # *	Business Name		
08010096538	SENECA VALLEY BUILDERS		
License Type *	First Name	Middle Name	Last Name
MHIC Ind ▼	RAYMOND		BEDNAR
Primary	Address Line 1		

Yes

▼ 2526 WEST BOSS ARNOLD RD

Address Line 2

City

KNOXVILLE

State

MD

ZIP Code

21758-0000

Phone 1

3014618023

Phone 2

Fax

0000000000

E-mail

RBFPD152@LIVE.COM

Applicant (This section is not required.)

Search

As Owner

As Lic. Prof

As Contact

Type *

Applicant

Relationship

Applicant

Primary

Yes

▼

First Name

▼ Kelly

MI

Last Name

Foy

Full Name

▼ Kelly Foy

Organization Name

Street Address

6224 Cliffside Terrace

Address Line 2

City

Frederick

State

MD

Zip Code

▼ 21701

Phone

240-994-8797

Cell

Fax

E-mail *

kelly@senecavalleybuilders.com

Addtl Info

Est Construction Cost *

10450

Housing Units *

0

Number of Buildings *

0

Public Owned

No

▼

Construction Type

--Select--

▼

MISC PERMIT INFO

MISCELLANEOUS PERMIT INFORMATION

Capital Project-No Fee *

☐ Yes ☒ No

Capital Project Number

Fee Exempt *

☐ Yes ☒ No

Roadside Tree Project Permit *

☐ Yes ☒ No

Roadside Tree Project Permit #

Existing Use *

SFD

Water

▼

Private

Sewage

Private

Expiration Date

3/26/2023 

PAYMENT INFORMATION

Check 1	Payee 1	Check 2	Payee 2	SAP Doc No	SAP Entered
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> 

Submit Cancel

[illegible][illegible][illegible]

EXISTING
PUDDING LANE



ESE CONSULTANTS
ENGINEERING • PLANNING • SURVEYING • ENVIRONMENTAL

7941 Colquhoun Gateway Drive • Suite 200 • Columbia, MD 21044
ESE Consulting, Inc.
P: 410-872-8938

DATE: 06/04/2007
BY: MJB
SCALE: 1" = 30'
JOB NO. 0007
FILE NO. 0007
FILE # OF PLANS: 1 OF 05
GND PLAN: 0007

Record Detail * (This section is required.)

Approved Zach
Silvest
9/19/2022

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Pool Spa	B22002887	07/25/2022
Description of Work		
SFD/ INSTALL 20 X 40 INGROUND POOL, DPETH 3.5' - 7', AUTO COVER, FENCE TO CODE, FILLED BY TRUCK		
check spelling		

Address * (This section is required.)

Search	Reset	Clear	Get Parcel & Owner	
Street #	Street Name	Street Type		
10500	PUDDING	LN		▼
Unit Type	Unit #	X Coordinate	Y Coordinate	
--Select-- ▼		-76.8824	39.25689	
City	State	Zip Code	Primary	
ELLICOTT CITY	MD	21042	Yes	▼

Parcel * (This section is required.)

Search	Reset	Clear	Get Address & Owner			
GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
11061255	0148	0	0	0	0	RURAL
Legal Description						
check spelling						

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
24	15	602303	5				
Plan Area	State Tax Id	Subdivision Name					
		Kings Forest					
Section	Area	Tax Map					
		23					
Grid	Zoning District	ADC Map					
23-24	RC-DEO	4814-J9					
SDP No.	Final Plan No.	WP File No.					
	ECP-14-046						
Record Plat No.	WS Contract No.	FDP No.					
25764-2576							
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Yes <input type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	2-08B	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner * (This section is required.)

Search	Reset	Clear
--------	-------	-------

Name *

Zach Fine

Address Line 1
10500 pudding lane

Address Line 2

Address Line 3

Mail City Mail State Mail Zip Code
Ellicott City MD 21043

Phone Primary
443-790-9180 Yes

E-mail
zfine@hollypoultry.com

Cell Number Fax Number

Professionals (This section is not required.)

Search Reset Clear

License # * Business Name
71753 HERITAGE ELITE LLC

License Type * First Name Middle Name Last Name
MHIC Co MICHAEL SHAFFERY

Primary Address Line 1
No 8335 PULASKI HIGHTWAY

Address Line 2

City State ZIP Code
ROSEDALE MD 21237

Phone 1 Phone 2 Fax
410-808-6988

E-mail
Dustin@elitepools.com

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type * First Name MI Last Name
Applicant Dustin Gacon

Relationship Full Name
--Select--

Primary Organization Name
Yes Elite Pools

Street Address
8335 Pulaski Highway

Address Line 2

City State Zip Code
Rosedale MD 21237

Phone Cell Fax
443-220-3781

E-mail *
Dustin@elitepools.com

Addtl Info

Est Construction Cost * Housing Units * Number of Buildings * Public Owned
50000 0 0 No

Construction Type
--Select--

POOL INFORMATION

MISCELLANEOUS POOL INFORMATION _____

Capital Project-No Fee *	Capital Project Number	Fee Exempt *	Water Supply *	Sewage Disposal *	
<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="text"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No	Private <input type="button" value="v"/>	Private <input type="button" value="v"/>	
Existing Use *	Type of Pool or Spa *		Pool Safety Device *	Electrical Permit Number	Expiration Date
Other - See Description of Work <input type="button" value="v"/>	In Ground Pool <input type="button" value="v"/>		Fence <input type="button" value="v"/>	E22004090	3/19/2023

PAYMENT INFORMATION

Check 1	Payee 1	SAP Doc No	SAP Entered
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Related Records

Showing 1-2 of 2

Permit Number	Record Type Alias	Status	Number	Street Name	Opened Date	Description
B22002887	Residential Pool or Spa Permit	Issued	10500	PUDDING	07/25/2022	SFD/ INSTALL 20 X 40 INGROUND POOK, DPETH 3.5' - 7.5' AUTO

**Submit** **Cancel**

DATE	04/04/2021	SCALE	1"= 30'	FILE NO	201906 107 13.000
BY	W.M.	JOB NO	2019	DRAWING	K.R.

PERMIT NUMBER: B

DATE ACCEPTED:



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: 10500 Pudding Lane		Unit:
City: Dayton	State: MD	Zip Code: 21036
Subdivision/Village/Complex Name: Kings Forest		SDP/WP/BA #:
Lot: 15	Tax Map:	Parcel: Grading Permit #:

DESCRIPTION OF WORK REQUIRED

Existing Use: vacant lot	Proposed Use: SFD	Estimated Cost: \$ 300,000
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None		
New 2 Story "Kalamazoo Kalamazoo" Modern Farmhouse elev. w. 2 car garage, 600 sq ft, 3rd floor walk up space, 3rd floor walk up space, all finished (see room, bedroom, bathroom and wet bar)		

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): Toll Mid Atlantic LP LLC		Primary Residence: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Owner's Street Address: 250 Gibraltar Rd.		Contact: Summer Riley
City: Hagerstown	State: PA	Zip Code: 17044
Phone: 410-872-9105	Email: sriley1@tollbrothers.com	

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: Denator Building Services		Contact Name: Tim Kerner
Street Address: PO Box 552		
City: Woodbine	State: MD	Zip Code: 21797
Phone: 443-309-7792	Email: tim@denatorbuildingservices.com	

CONTRACTOR INFORMATION REQUIRED

Business Name: Toll Brothers		Contact: Summer Riley
Licensee's Name: Toll Mid Atlantic LP LLC		License #: 8220
Street Address: 7164 Columbia Gateway Dr. Ste. 230		
City: Columbia	State: MD	Zip Code: 21046
Phone: 410-872-9105	Email: sriley1@tollbrothers.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: <input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> SF Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling (MF*)		Condo: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Utilities: <input type="checkbox"/> Electric <input type="checkbox"/> Gas	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private (Well)	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Septic)
Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other:		Roadside Tree Project: <input type="checkbox"/> No <input type="checkbox"/> Yes: #
Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input type="checkbox"/> None		Fire Alarm System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Voice Evac

ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options: "Kalamazoo" Modern Farmhouse 2 car garage, 600 sq ft, 3rd floor walk up space, 3rd floor walk up space, all finished (see room, bedroom, bathroom and wet bar)				
# of Bedrooms (SF): 2	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):
# Rooms: 12	# Full Baths: 7	# Half Baths: 1	# Fireplaces: 1	
Garage/Carport Info: <input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input type="checkbox"/> None				
Basement/Foundation Info: <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Post & Pier <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Finished Basement: <input type="checkbox"/> Full or <input type="checkbox"/> Partial				
1st Fl Width: 82	1st Fl Depth: 63	2nd Fl Width: 67	2nd Fl Depth: 63	Bsmt Width: 82 Bsmt Depth: 63
Energy Method: <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI		Gross Area: 10,685 sq ft	Occupiable Area: 10,433 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

FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:

<input type="checkbox"/> PR	<input type="checkbox"/> DPZ	<input type="checkbox"/> DED	<input type="checkbox"/> Health DBenard	<input type="checkbox"/> SHA	<input type="checkbox"/> CID
-----------------------------	------------------------------	------------------------------	---	------------------------------	------------------------------

SUBMITTAL FEES:

PAYMENT:

ACCEPTED BY:

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

Date: 8/3/2021

To: Dana Bernard
(Person's Name and Division)

From: Jim Kerwin Agent for Toll Bros. (443) 309-7792
(Your Name, Company Name and Telephone Number)

Subject: Project name Kingsly Woods
Project site address 10500 Pudding Lane
Permit # B21001239 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 Basement Floor Plans showing Bedroom removed and replaced by a study, and removing Full Bath replaced by Powder Room (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)

Jim Kerwin
Please Print Name

Telephone No: 443-309-7792
E-Mail Address: Jim@DecaturBuildingServices.com

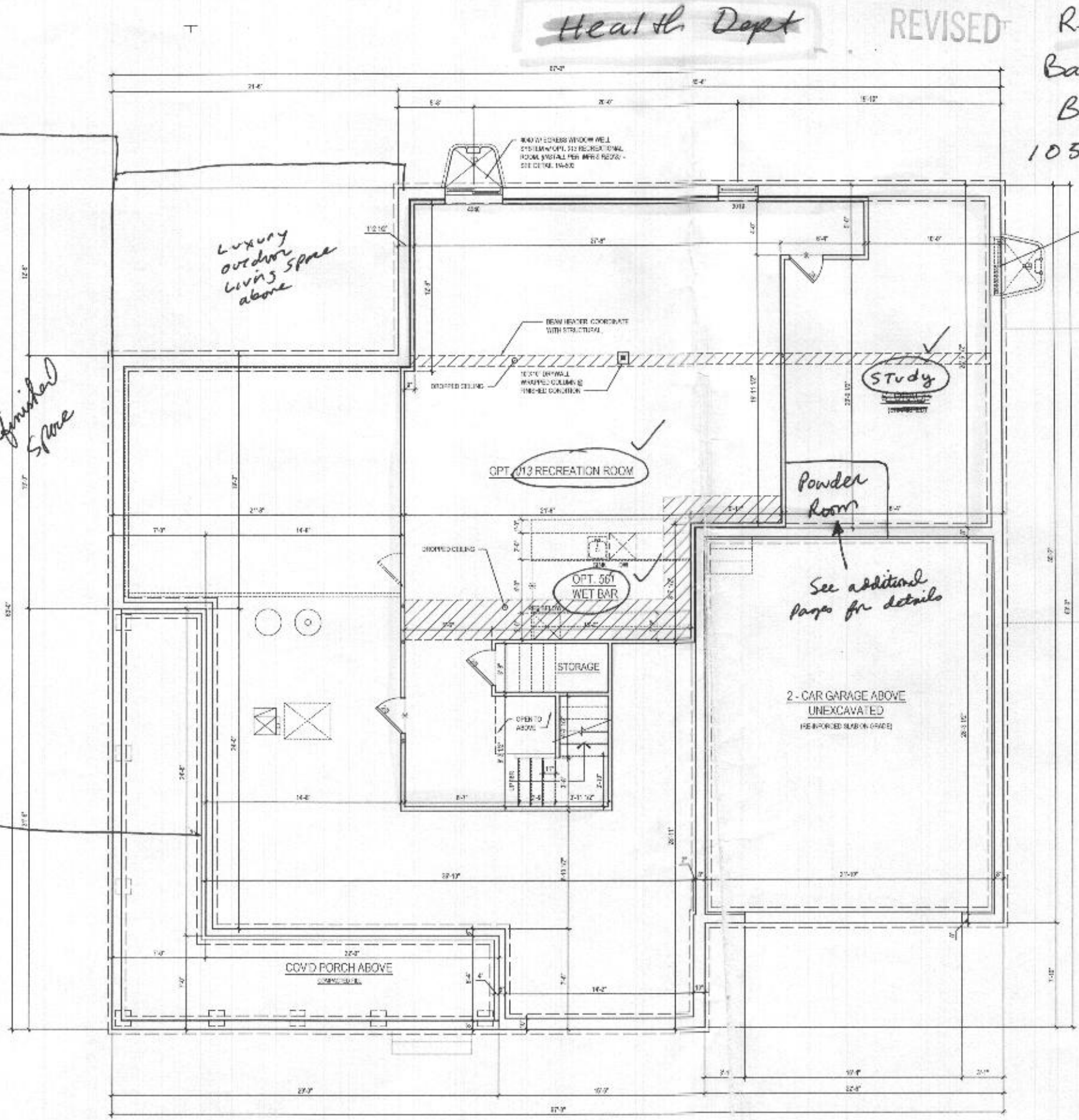
PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT 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 

White-Plan Review / Yellow-Applicant / Pink-Permit Division
t:\forms\transmit.frm - Rev. 04/2014

RECEIVED
AUG 03 2021
LICENSES & PERMITS
DIVISION

- GENERAL PLAN NOTES**
- A. ALL ROOM STUD PARTITIONS NOT DIMENSIONED ARE TO BE 1/2" FOR INTERIOR AND 1/2" FOR EXTERIOR WALLS UNLESS OTHERWISE NOTED.
 - B. ALL INTERIOR DIMENSIONS ARE TO FACE OF STUD.
 - C. ALL EXTERIOR DIMENSIONS ARE TO FACE OF STUD.
 - D. ALL DIMENSIONS GOVERN OVER SCALE.
 - E. ALL SMOKE DETECTORS ARE TO BE WIRE IN SUCH A MANNER THAT ACTIVATION OF ONE WILL ACTIVATE THEM ALL.
 - F. ENCLOSED ACCESSIBLE SPACE UNDER STAIRS SHALL HAVE WALLS AND CEILING PROTECTED ON ENCLOSED SIDE WITH 1/2" GYPSUM BOARD.
 - G. ALL WINDOWS SIZE ARE NOTED IN FEET - INCHES AS MEASURED FROM SASH TO SASH.
 - H. REFER TO ELEVATIONS FOR WINDOW HEAD HEIGHTS.
 - I. ALL DOORS ARE TO BE 8' HIGH UNLESS OTHERWISE NOTED.
 - J. WASHERS ALWAYS TO BE ON LEFT SIDE OF DRYER.
 - K. DRYER WASHERS ALWAYS TO BE ON RIGHT SIDE OF DRYER.



Health Dept

REVISED

Revised finished
Basement floor Plan
B21001239
10500 Pudding Lane
LOT 15

- * Finished Basement Bathroom removed and study added.
- * Full Bath removed and Powder Room added

OPT. 263102 ONE CAR GARAGE
OPT. 263019 TWO CAR GARAGE

lessard
DESIGN

8521 Leesburg Pike
Suite 700 | Vienna, VA 22182
P: 571.830.1800 | F: 571.830.1801
www.lessarddesign.com

SEAL & SIGNATURE:

OWNER:

TOLL BROTHERS
15775 BELMONT EXECUTIVE PLAZA
SUITE 200
ARLINGTON, VA 22207
P: 571.291.3036
F: 571.227.1755
CONTACT: CHRISTINA LEMLEY
CLM@tollbrothers.com

PROJECT NAME:

KALORAMA

DATE:

12/11/21

NO. DESCRIPTION DATE

01	DESIGN DEVELOPMENT	03.25.20
02	SCHEMATIC DESIGN	05.21.20
03	PERMIT SET	07.20.20
04	CONSTRUCTION SET	09.20.20
05	FINAL SET	12.20.20

PROJECT NO. 104-104

DESIGNER: M. & G.

DATE: 12/11/21

SCALE: 1/4" = 1'-0"

PROJECT NAME: KALORAMA

A-101

1 PART BASEMENT PLAN
A-101 SCALE: 1/4" = 1'-0"

W/ OPT. 013 - RECREATION ROOM