

Building Permit Application

Howard County Maryland

Department of Inspections, Licenses and Permits

3430 Court House Drive
Permits: 410-313-2455 www.howardcountymd.gov

Received:	
	Received:

Permit No.: 218000544

Building Address: 36	54	SHARP RD		Property Owner's Name:	HAY FI	4 NOVA
		te: MD Zip Code:	1138	Address:	1.5	7:45
AL 10.00		SDP/WP/BA #:		Phone: St	ate: V Fav	Zip Code:
Census Tract:				Email:	1 1 5	
				7	11 06 1	
-15		rea: Lot:		Applicant's Name & Mailing A Applicant's Name:	HIV C	- July Land
- 20		el:Grid:	4	Address:	" + F	
Zoning: Maj	p Coord	inates: Lot Size	4.03	City: Phone: 416770 43	APax: A	Zip Code: 2174
Existing Use:	11	t realth	F	Email:	2 _	- 1 - p p 1 + 2 A - 1 -
Proposed Use:	31		Miss	Contractor Company:		
Estimated Construction Cost		100,000 4,	780	Contact Person:		
Description of Work:	st. I	PAME APPINE	NTE	City:State		Zip Code:
EX. KEND	TN	t, ZFLORES	7 8	License No. :		
LINFINISHE	P 1	3A STE MAINT	1	Phone:		
Occupant/Tenant Name:			TENG	Email:		The same of the sa
Was tenant space previously		•	□No	Engineer/Architect Company:	1 125 15 18	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	- V -				- All with the	
Contact Name:		- IAC WIEFE	1 44 17-	Responsible Design Prof.:	ARIAT.	JUNETL LAST
Addi C33.	*	-1	710	71441 233.	-	CUFFE CAND.
	2000	State: Zip Code:	3400		e - 160	Zip Code:
Phone:	40	Fax:	414	Phone:	Fax:	1-1-417
Email:	100	THEVELTERN	WET.	Email:	12/40	VERTICALINE
Commercial Building Chard	acteristi	cs Residential Building Ch	aracteristics	<u>Utilities</u>		
Height:		□ SF Dwelling □ SF Tov	vnhouse	Electric: □ 4 es □	No	
No. of stories:		<u>Depth</u>	Width	Gas: ☐ Yes ☐	No	
Gross area, sq. ft./floor:		1 st floor:	· fine	Water Supply		
Area of construction (co. ft.)	١.	2 nd floor:	have you	☐ Public		
Area of construction (sq. ft.)):	Basement:	-	☐ Private		
Use group:		☐ ₩infinished Basement		Sewage Disposal		
ose Broup.		☐ Crawl Space		☐ Public		
Construction type	:	☐ Slab on Grade		□-Pfivate	1	
☐ Reinforced Concrete		No. of Bedrooms:	2			
☐ Structural Steel		Multi-family Dw	elling	Heating System		
☐ Masonry		No. of efficiency units:		☐ £lectric ☐ Oil		
□ Wood Frame		No. of 1 BR units:		☐ Natural Gas ☐ Propane	Gas	
☐ State Certified Modular		No. of 2 BR units:		☐ Other:		
		No. of 3 BR units:		Sprinkler System:		
		Other Structure:		☐ Yes ☐ No		
		Dimensions:				
Roadside Tree Project		(VI) (SI) (SI)		Grading Permit	Number	
and the second and the second control of the second	No.	Roof:		Grading Ferrinc	ivaliliber.	
Roadside Tree Project	ermit#	☐ State Certified Modul	ar	Building Chall Barre	** **	
		☐ Manufactured Home		Building Shell Perm	it Number:	
WITH ALL REGULATIONS OF HOWA	RD COUN	TY WHICH ARE APPLICABLE THERETO;	(4) THAT HE/SHE W FER ONTO THIS PROPI	MAKE THIS APPLICATION; (2) THAT THE INFO ILL PERFORM NO WORK ON THE ABOVE RE ERTY FOR THE PURPOSE OF INSPECTING THI	EFERENCED PROPI	ERTY NOT SPECIFICALLY DESCRIBED IN
			VI-	37	-	
Email Address		***************************************	Dá	ite		
	-	1641				
Title/Company						
			o: DIRECTOR OF FI PLEASE WRITE NEA -FOR OFFICE			
					Cam.	- Comment of the Comm
AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK Front:	INFORMATION .	Filing Fee Permit Fee	\$ 05-00

State Highways **Building Officials** PSZA (Zoning)

PSZA (Engineering) Is Sediment Control approval required for issuance? Yes \(\subseteq \) No \(\subseteq \) CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION		
Front:		
Rear:		
Side:		
Side St.:		
All minimum setbacks met?	☐ Yes	□No
Is Entrance Permit Required?	☐ Yes	□No
Historic District?	☐ Yes	□No
Lot Coverage for New Town Z	one:	
SDP/Red-line approval date:		

Filing Fee	5 VA 11
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'I per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$.00
Check	# 1449

Green: PSZA,Zoning

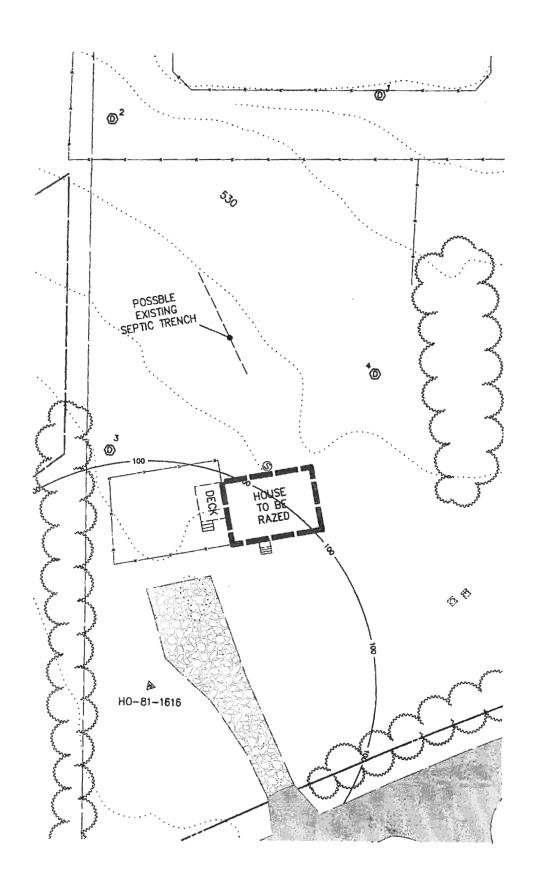
Yellow: PSZA, Engineering

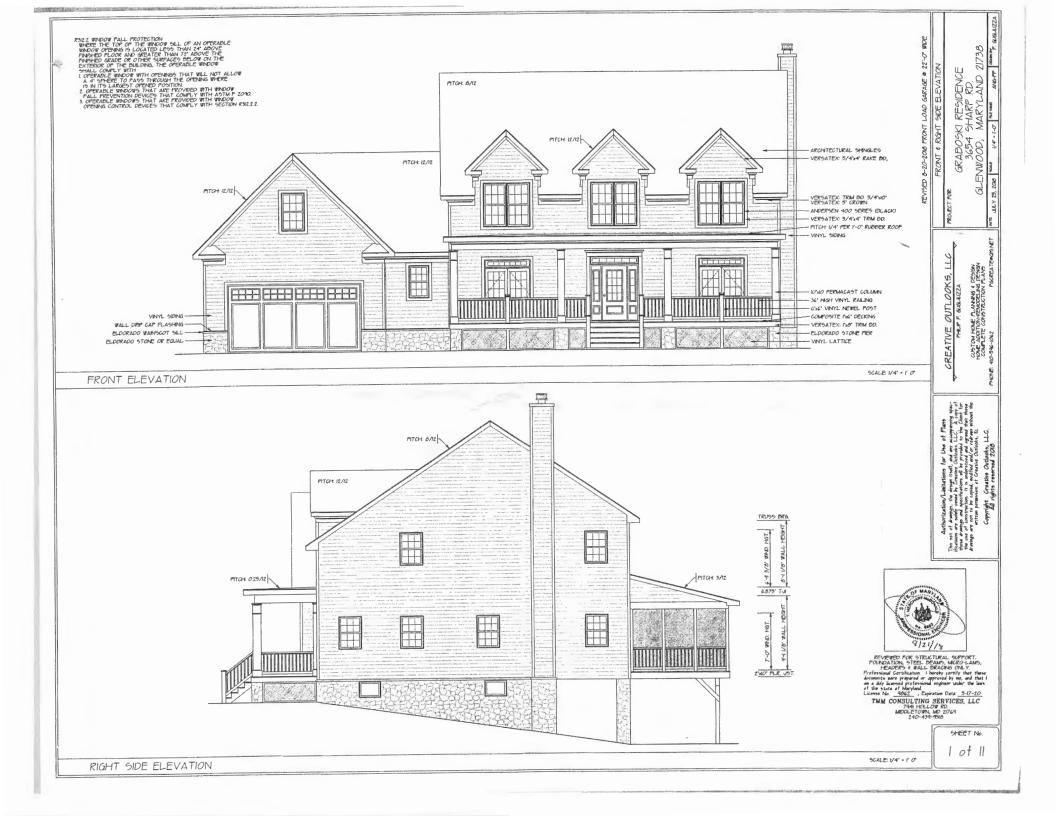
Pink: Health

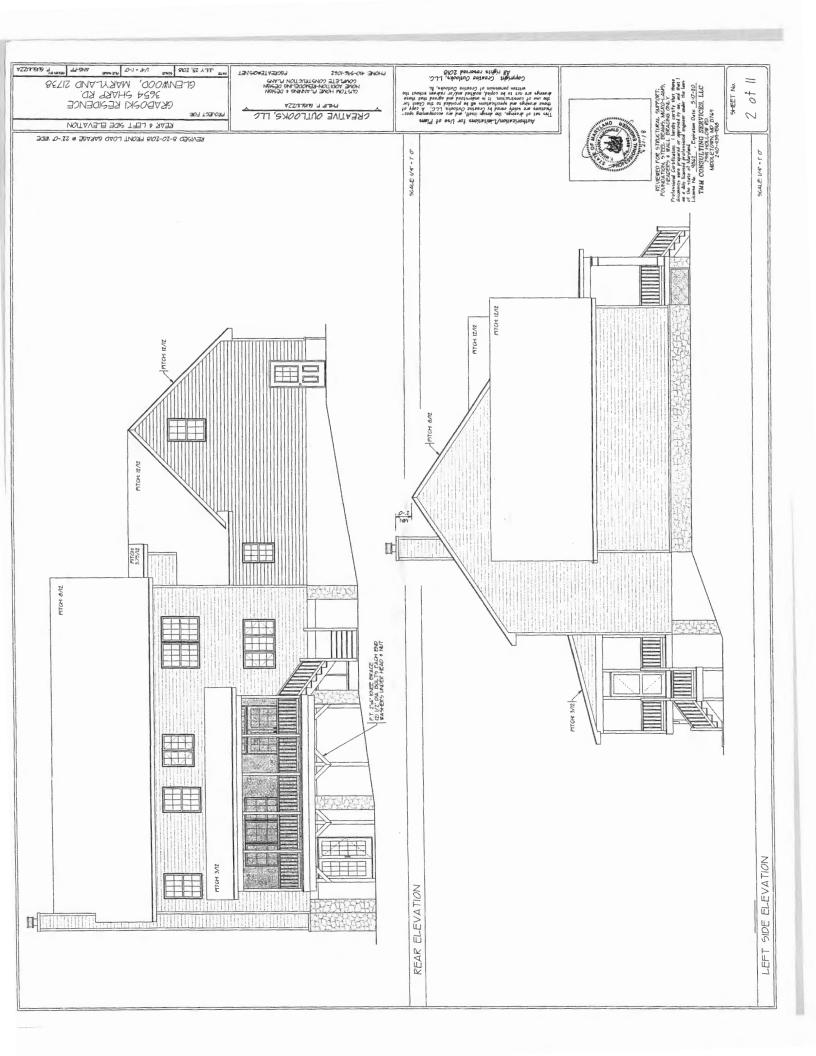
Gold: SHA

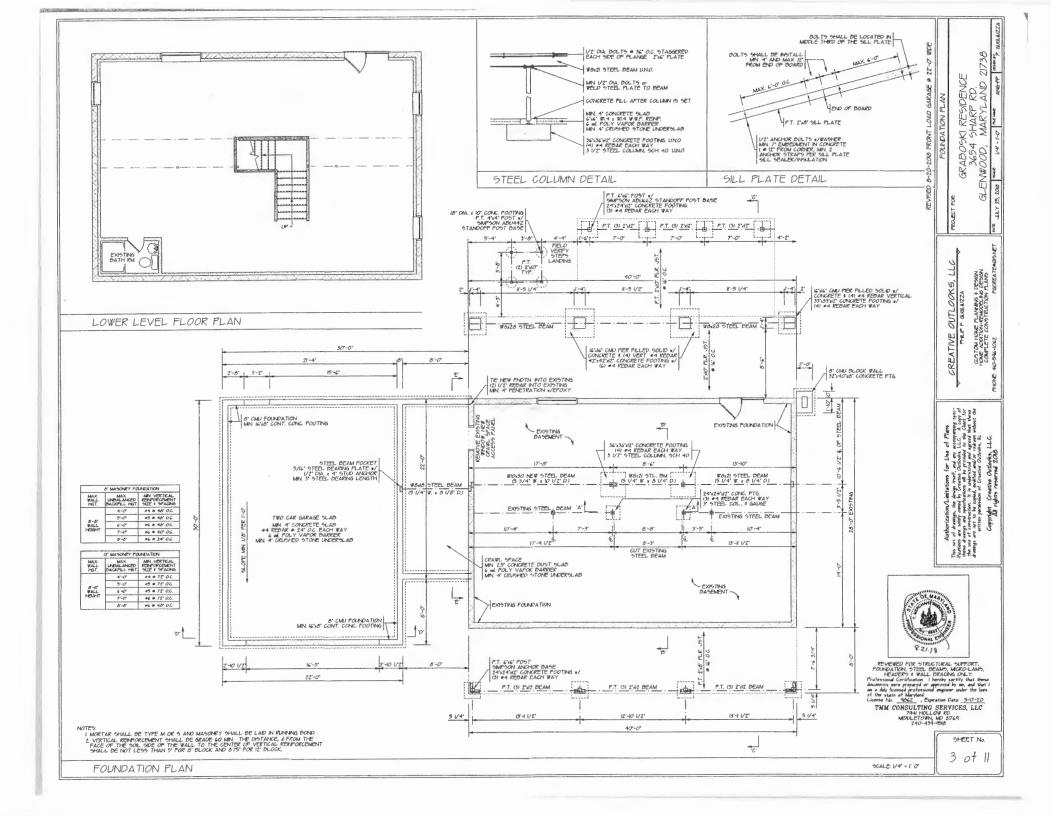
COMPLETE THIS FORM WHEN DROPPING OFF ANY CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:

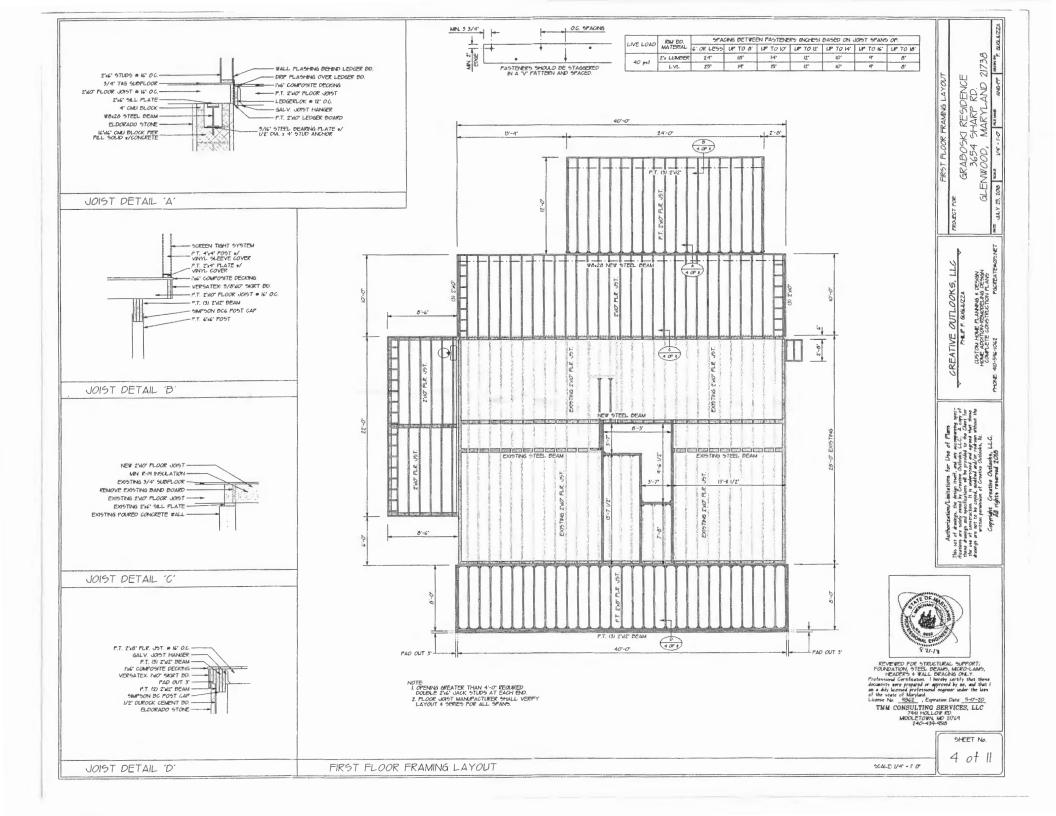
	r 11.6	•	
Date:	4/0/18		·
To:	Day Swingle	·	
	(Person's Name and Division)	***	Yam Dra-
From:	(Your York Company Name and Tolonk	(40) 128 a	300 RECEIVED
C1-1	(Your Name, Company Name and Teleph	SKI PESIDEN	APR 1 1 2018
Subject:	Project name		
	Project site address 3654	SHAPP ROAD	PLAN REVIEW DIVISION
	Permit Number 5 1800	SDP #	
	Other information pertinent to this pro	ject	
✓ Please	check the attachments below that you are sub	mitting with this transmittal:	
L	etter of response to Howard County plan revi	ew code letter	
X R	Revised plans and/or revised details: When su	bmitting for a complete re-review, d	luplicate sets shall be submitted.
St	structural steel certification		
E	energy conservation calculations		
	Certification for	(be specific).	
	Copies of Paus ED PUNS	(be specific).	
	Two sets of single family dwelling model plan		odel name and/or#
		s to be placed on permanent me. We	oder name and/or #
	Other		- V
	s there anyone else that should be contacted re		stions?
]	If so, please list that person's name and telep		2 1 / 1 · -
<u></u>	ANNETTE ME		CONING
(1)	Person's name)	(Telephone number)	
PLEASE	ASSURE ALL DOCUMENTS AND/OR	REVISIONS ARE APPROPRIAT	ELY SIGNED AND SEALED, II
	ARY, BY A LICENSED ARCHITECT O		
	IATION MAY RESULT IN THE DELAY O TIONS, LICENSES AND PERMITS WILL		
	VILDING PERMIT IS APPROVED BY T		
	ORY AGENCIES, AND THE BUILDING P		
	THE APPROPRIATE CONTACT PERSO BE DIRECTED TO THE PERMIT DIVISI		~
	VINQUIRIES SHALL BE DIRECTED TO T		_
	IM OF FIVE (5) WORKING DAYS FOR A		
	M	Ω_{2}	
Received b	by	Ken's, 101 # 7	white: Plan Review Division
			yellow: Applicant pink: Permit Division
t:\Updated	forms\transmit.frm - Rev. 5/08	Plot plan set Han	(a)
	<u>†</u>	LOT PIGHT TO HEO	UAN 102

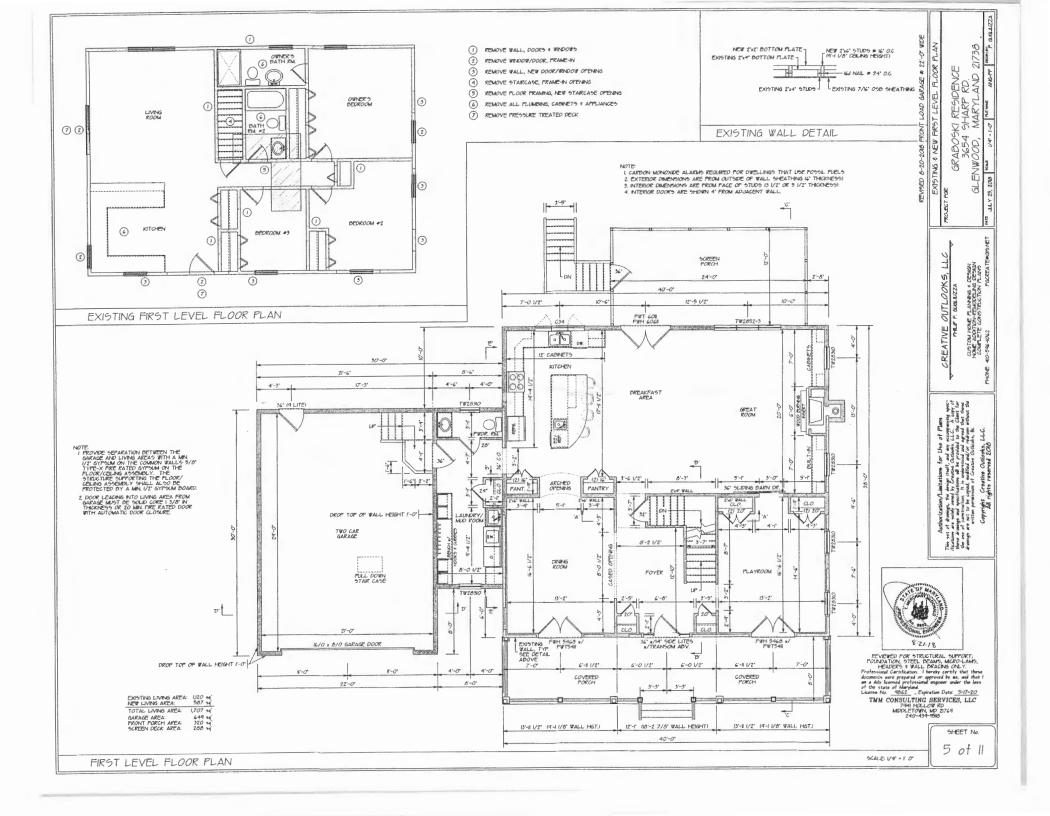


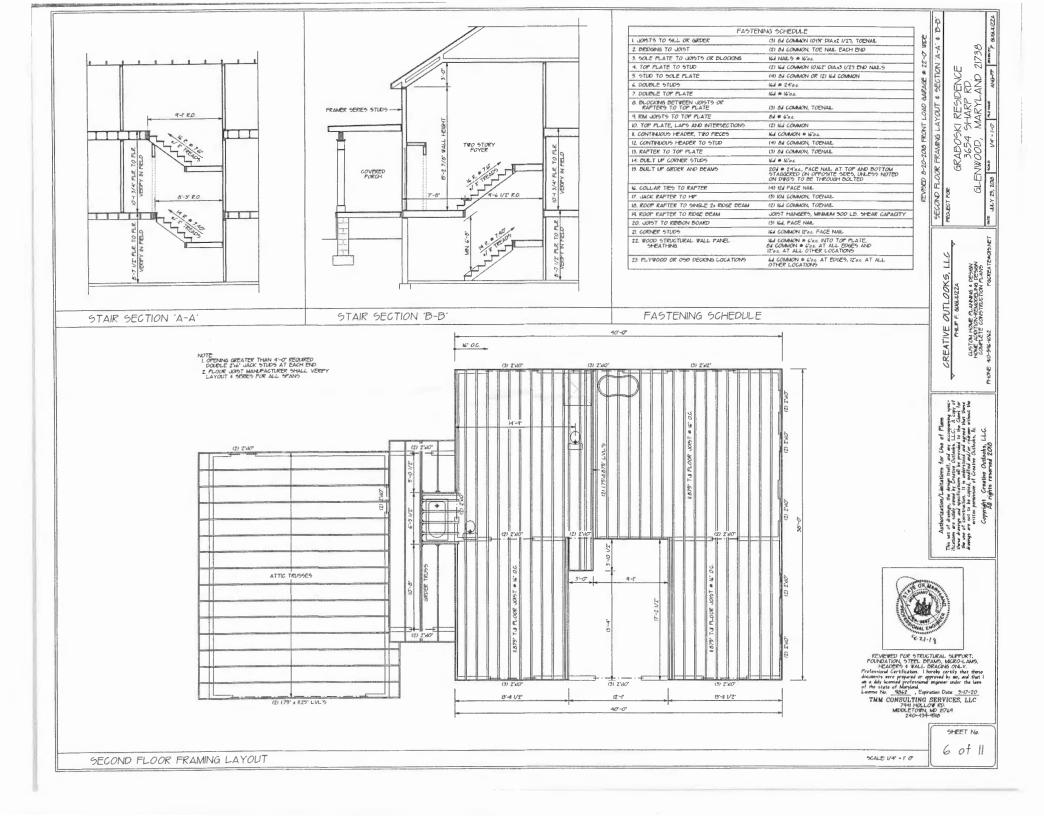


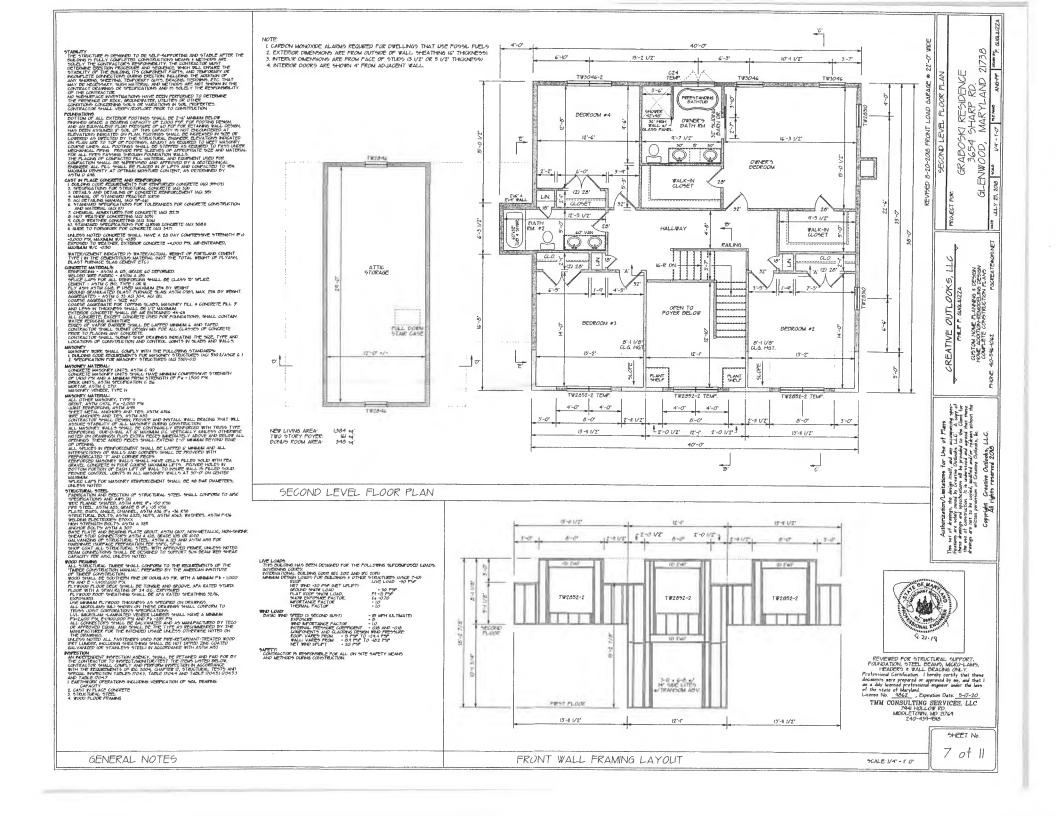


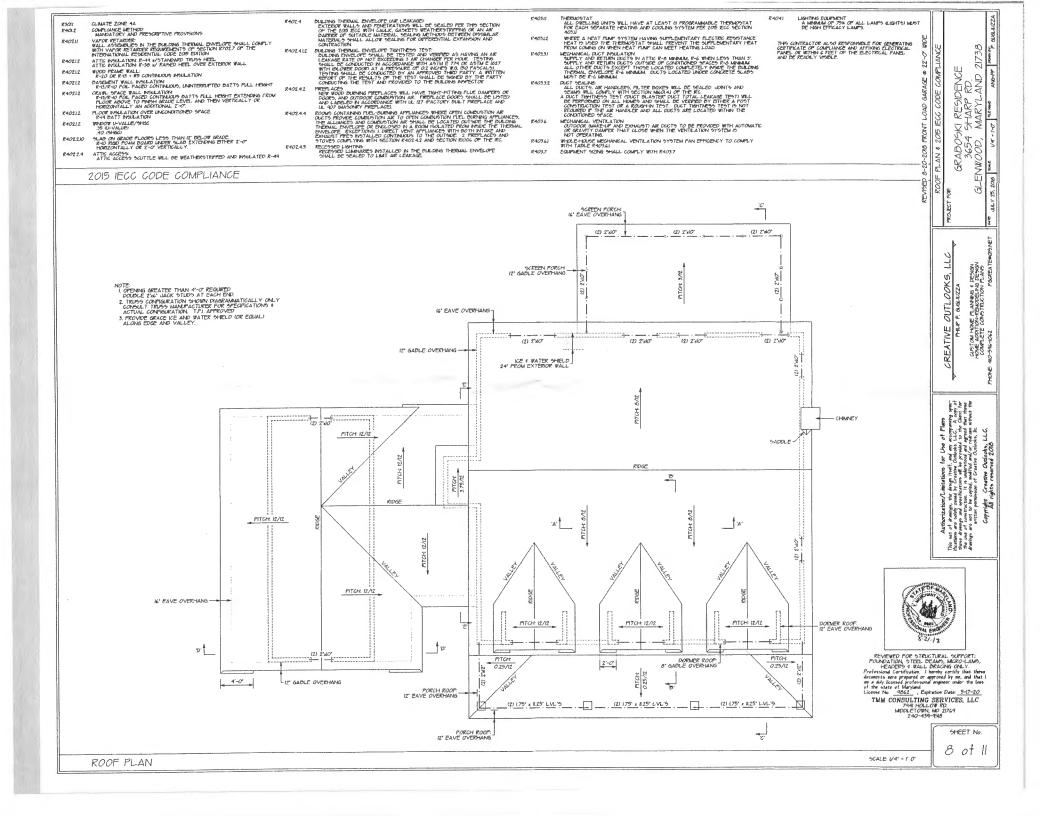


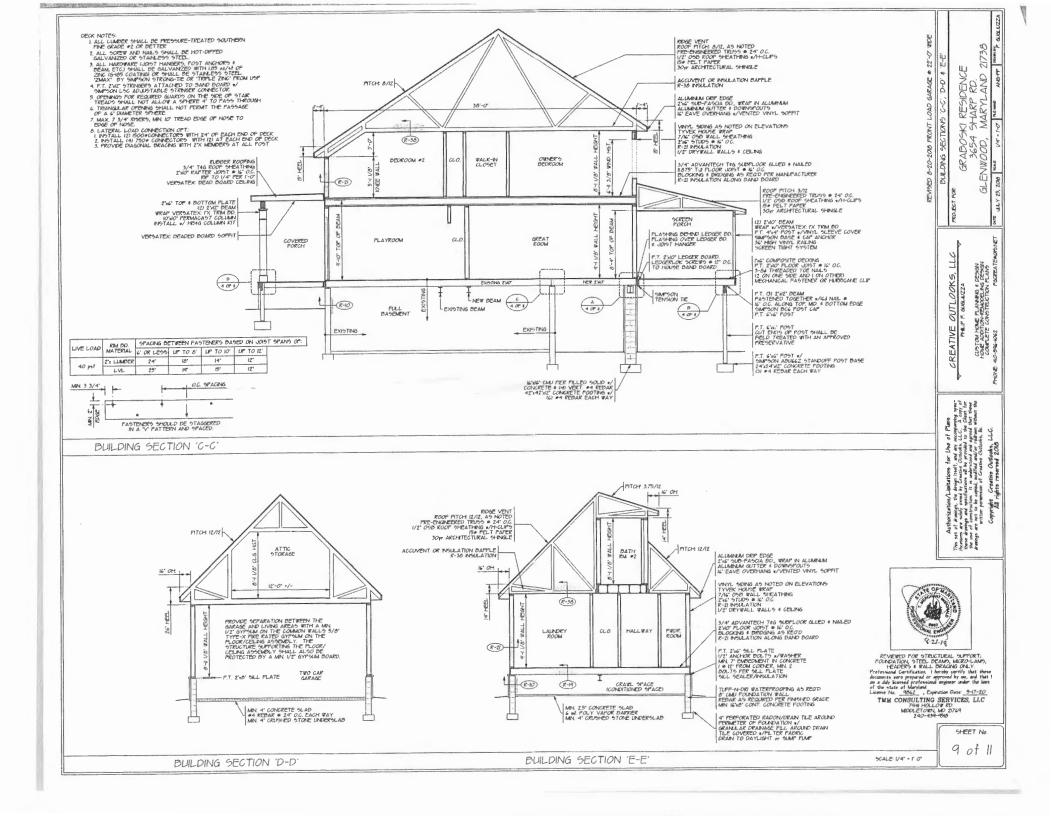


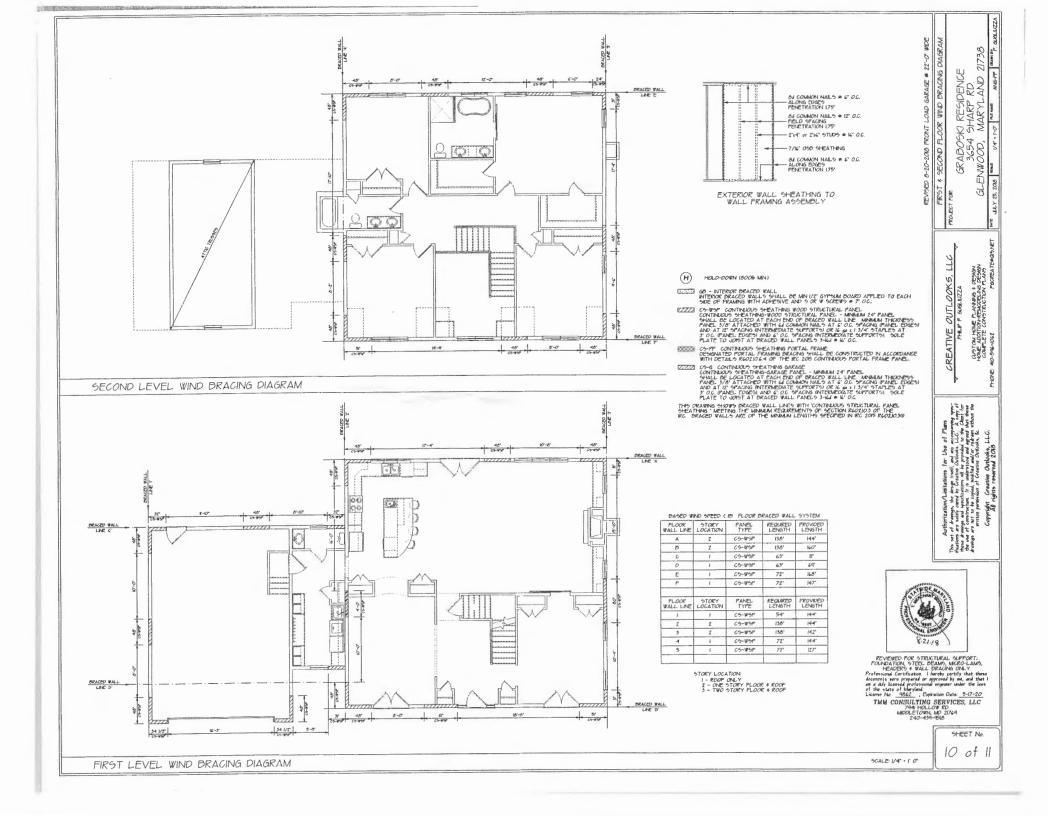


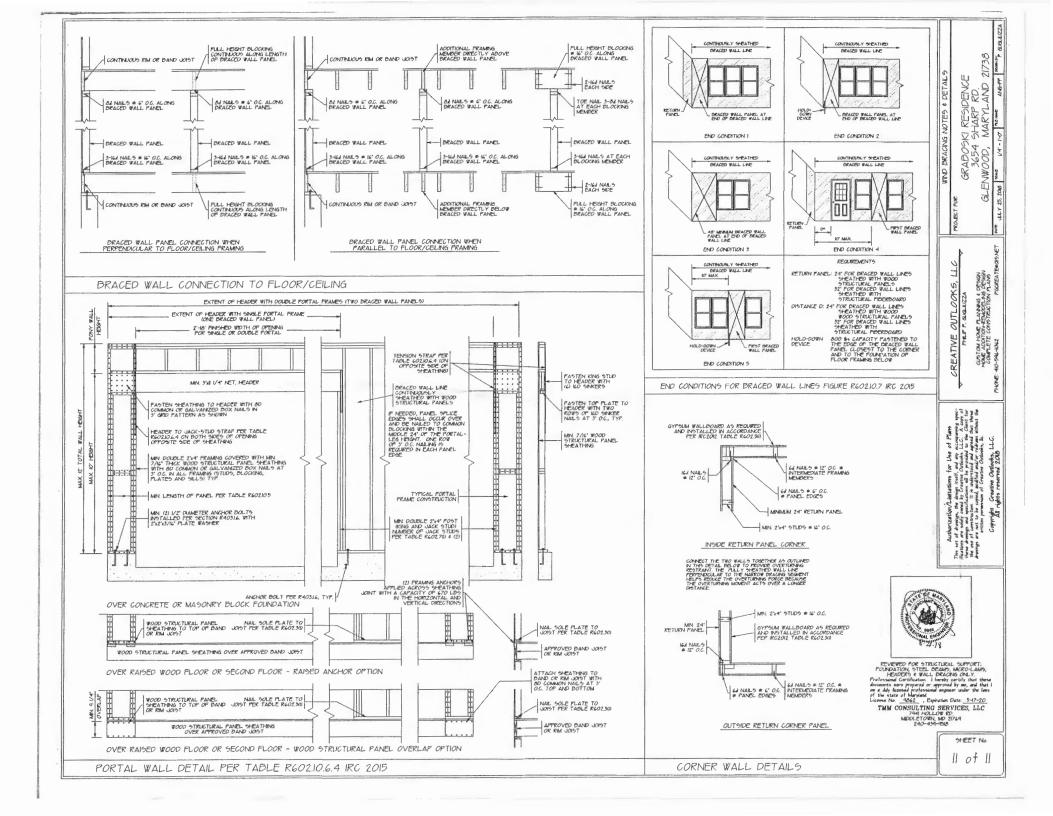












COMPLETE THIS FORM WHEN DROPPING OFF ANY CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:

Date:	8/23/18	ì
То:	PAN SWINDER (Person's Name and Division)	_
From:	(Your Name, Company Name and Telephone Number) (Person's Name and Division) (443 955 241e)	5
Subject:	Project name FARNEUA RESIDENCE Project site address 3454 SHARP RD Permit # B18000549 SDP#	RECEIVED SEP 0 4 2018
	Other information pertinent to this project	PLAN REVIEW DIVISION
X - X - X	Letter of response to address plan review comment letter Revised plans and/or revised details: When submitting for a complete re-review, duplicate Letter Summarizing Changes Energy conservation calculations Copies of PLOT PLAN (be specific). Health Department Request DPZ/DED Request Two sets of single family dwelling model plans to be placed on permanent file: Model nan Other CHANGE OF APPLICANT + CONTRACT Contact Person Information: (Required) PEL PEVSED PE Telephone No: Please Print Name E-Mail Address:	Applicant's Request
NECES INFOR OF INS ONCE TO SIGNAT WILL IT INQUIT AND P. PLEAS THANK	E ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SINGARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED MATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINE PECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROPE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND THE BUILDING PERMIT IS READY FOR ISSUANCE, NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. RIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE LAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTS YOU. INV # 54 @ CV # 57 13 13 14 15 16 16 16 16 16 16 16	THAT INSUFFICIENT OR. THE DEPARTMENT OBLEM. IN ADDITION, ALL OTHER REQUIRED THE PERMIT DIVISION ALL PERMIT STATUS E RELATED QUESTIONS VISION AT 410-313-2436. TALS TO BE REVIEWED.

PER APPLICANT REQUEST

Bernard, Dana

From:

John Patrick Chalk < jpcarchitects@verizon.net>

Sent:

Friday, May 04, 2018 12:44 PM

To:

Bernard, Dana

Subject:

RE: 3654 Sharp Road

Hi,

The client is reconsidering the scope of the project due to budget considerations. Once we settle on the size of the project (reduce size), then we will most likely be resubmitting a completely new set of plans.

Thanks, John

From: Bernard, Dana < dbernard@howardcountymd.gov >

Sent: Friday, May 04, 2018 10:27 AM **To:** JPCARCHITECTS@VERIZON.NET **Subject:** FW: 3654 Sharp Road

From: Bernard, Dana

Sent: Friday, May 04, 2018 10:27 AM

To: Bernard, Dana

Subject: RE: 3654 Sharp Road

Good Morning Mr. Chalk,

I have received a revised plot plan for your project. However, Your plan is still under review until the previous requests are addressed. If you have any questions don't hesitate to give me a call.

Dana Bernard

From: Bernard, Dana

Sent: Tuesday, April 03, 2018 11:54 AM **To:** 'JPCARCHITECTS@VERIZON.NET'

Subject: 3654 Sharp Road

Mr. Chalk,

I am contacting you in regards to Building Permit # B18000549. In order to move forward with your building permit we will need an upgrade for your system. You currently have 3 bedrooms and a 1000 gallon tank which is currently sufficient. However, the addition would increase the number of bedrooms and your current system cannot accommodate this addition. A 1500 gallon tank will be needed to accommodate the 4th bedroom along with an increase in the length of your trenches. If you have any additional questions don't hesitate to e-mail me or give me a call.

Thank you & Have a*")
,.',.*"),.*")
(,.'(,.'* Day!

Dana Bernard, R.E.H.S/L.E.H.S. Environmental Specialist II Bureau of Environmental Health Well and Septic Program

Bernard, Dana

From:

Bernard, Dana

Sent:

Tuesday, April 03, 2018 11:54 AM 'JPCARCHITECTS@VERIZON.NET'

To: Subject:

3654 Sharp Road

Mr. Chalk,

I am contacting you in regards to Building Permit # B18000549. In order to move forward with your building permit we will need an upgrade for your system. You currently have 3 bedrooms and a 1000 gallon tank which is currently sufficient. However, the addition would increase the number of bedrooms and your current system cannot accommodate this addition. A 1500 gallon tank will be needed to accommodate the 4th bedroom along with an increase in the length of your trenches. If you have any additional questions don't hesitate to e-mail me or give me a call.

Thank you & Have a*´`')
,..',..*´`') ,..**

(,..'(,..'* \\' | | | | | | | Day !

Dana Bernard, R.E.H.S/L.E.H.S. Environmental Specialist II Bureau of Environmental Health Well and Septic Program Phone (410) 313-2775

E-mail: DBernard@howardcountymd.gov