

PERMIT NUMBER: B 21004779

DATE ACCEPTED:

DILP 2021 DEC 8 PM 3:45

**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: 2864 Rolling Fork Way		Unit:
City: Glenwood	State: MD	Zip Code: 21738
Subdivision/Village/Complex Name:		SDP/WP/BA #:
Lot: 27	Tax Map: 0014	Parcel: 0123
Grading Permit #:		

DESCRIPTION OF WORK REQUIRED

Existing Use: Basement & Master Bath	Proposed Use: Basement & Master Bath	Estimated Cost: \$200,000.00
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		

SDF/alterations to existing dwelling to include: Finish existing unfinished basement to include entertainment area, bathroom (ex. plumbing), flex room and gym. Approx. 1316 sqft. Renovate existing 2nd floor owners bath, approx. 128 sqft

PLAY ROOM

OVERALL
Sqft 1,444**PROPERTY OWNER INFORMATION REQUIRED**

Owner(s) Name(s) (As it appears on tax records): Justin Hoover & Sara Cooper		Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: 2864 Rolling Fork Way		
City: Glenwood	State: MD	Zip Code: 21738
Phone: (240) 375-0474	Email: jhoover@pcmservices.com	

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: Transforming Architecture		Contact Name: Karen Pitsley
Street Address: 7612 Browns Bridge Road		
City: Highland	State: MD	Zip Code: 20777
Phone: (301) 776-2666	Email: info@transformingarchitecture.com	

CONTRACTOR INFORMATION REQUIRED

Business Name: R&D Remodeling LLC	
Licensee's Name: Robinton Cabrera	License #: MHIC 117355
Street Address: 6634 PEEBLE COURT	
City: FREDERICK	State: Maryland
Phone: (301) 448-3665	Zip Code: 21703
Email: rdremodeling10@gmail.com	

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: Transforming Architecture		Name: Karen Pitsley
Street Address: 7612 Browns Bridge Road		
City: Highland	State: MD	Zip Code: 20777
Phone: (301) 776-2666	Email: info@transformingarchitecture.com	

BUILDING CHARACTERISTICS REQUIRED

Primary Structure: <input checked="" 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 checked="" type="checkbox"/> Gas	Water Supply: <input type="checkbox"/> Public <input checked="" 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 checked="" type="checkbox"/> Propane <input type="checkbox"/> Other:		Roadside Tree Project: <input checked="" 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 checked="" type="checkbox"/> None		Fire Alarm System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac

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

Model Name & Options:				
# of Bedrooms (SF):	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):
# Rooms:	# Full Baths: 4	# Half Baths: 0	# Fireplaces: 2	
Garage/Carport Info: <input checked="" 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 checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Finished Basement: <input type="checkbox"/> Full or <input type="checkbox"/> Partial				
1 st Fl Width: 54	1 st Fl Depth: 34	2 nd Fl Width: 54	2 nd Fl Depth: 34	Bsmt Width: 54 Bsmt Depth: 34
Energy Method: <input checked="" type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI		Gross Area: 5,090 sq ft	Occupiable Area: 4,448 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

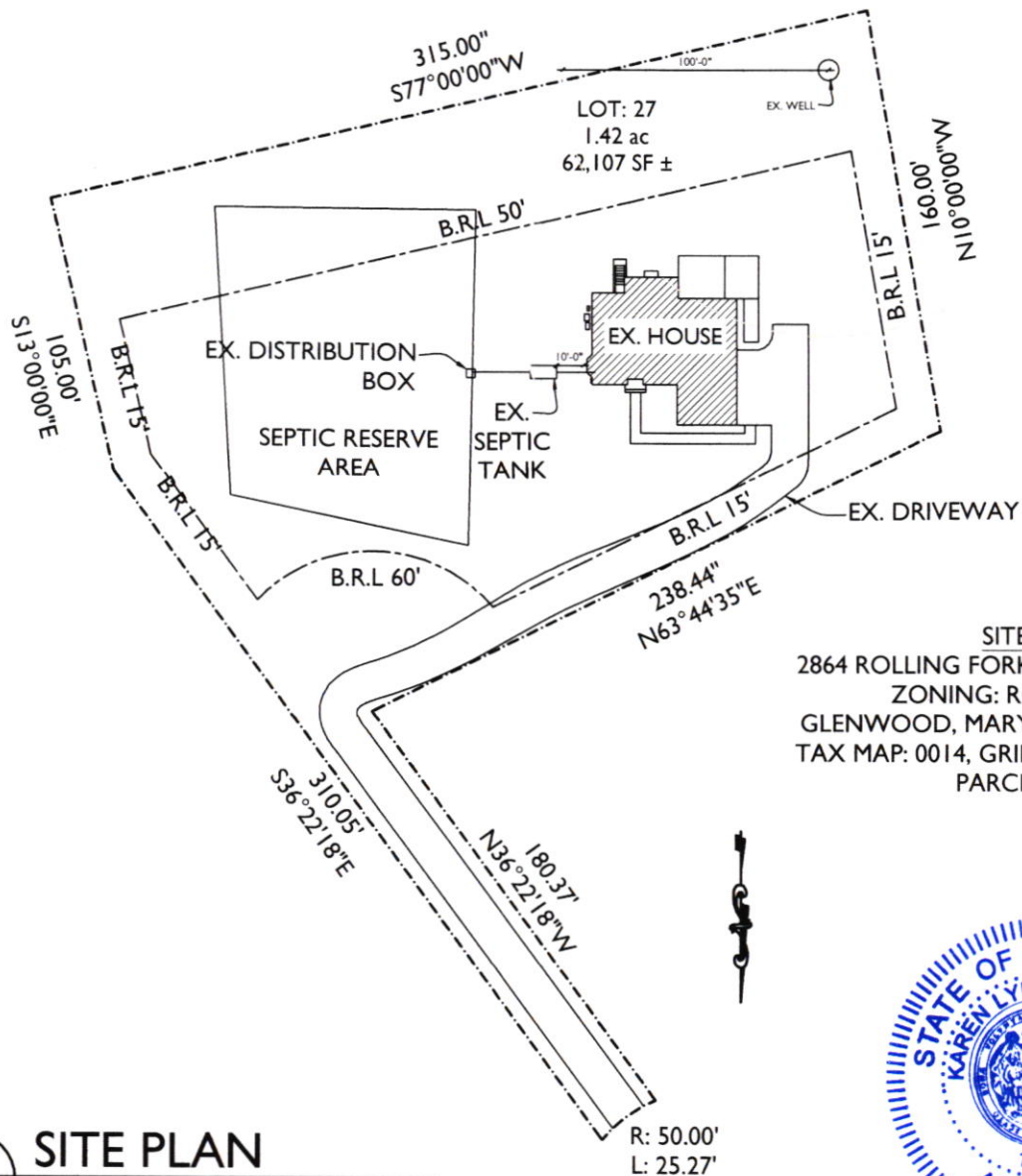
FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

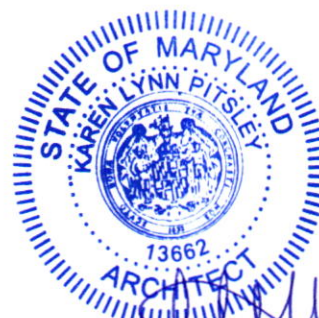
AGENCIES REQUIRED/APPROVALS:

<input checked="" type="checkbox"/> PR	<input checked="" type="checkbox"/> DPZ	<input type="checkbox"/> DED	<input checked="" type="checkbox"/> Health 12/20/21	<input type="checkbox"/> SHA	<input type="checkbox"/> CID
SUBMITTAL FEES: \$135.00		PAYMENT: * WILL PAY ONLINE		ACCEPTED BY: AKH	

PLANS RECEIVED (FLOOR PLANS TOO LARGE TO SCAN)



SITE INFO:
2864 ROLLING FORK WAY
ZONING: RC-DEO
GLENWOOD, MARYLAND
TAX MAP: 0014, GRID:0011,
PARCEL:0123



[Signature]
exp. 10/2/23

SITE PLAN
SCALE: 1"=70'-0"



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Highland, MD 20777
301-776-2666

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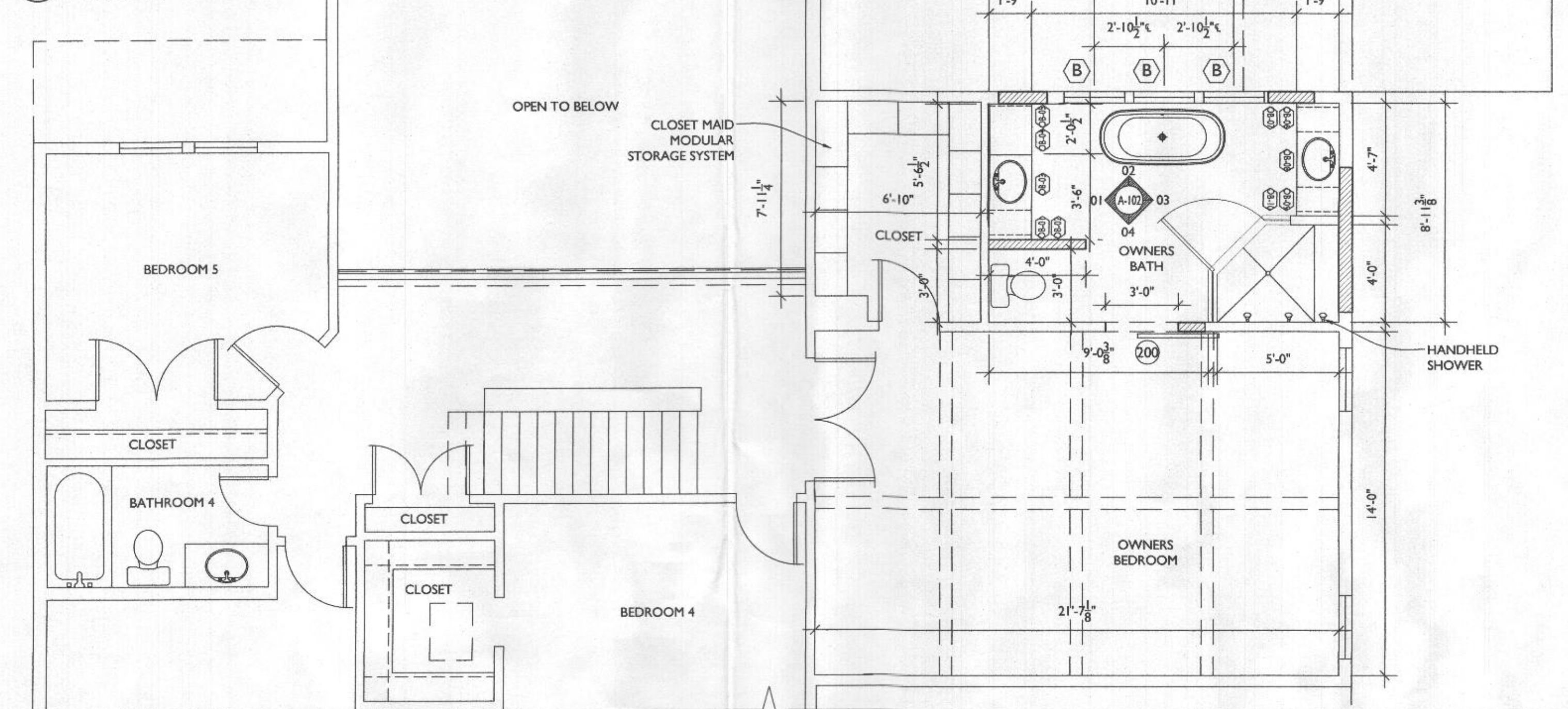
HOOVER RESIDENCE

2864 ROLLING FORK WAY
GLENWOOD, MD 21738

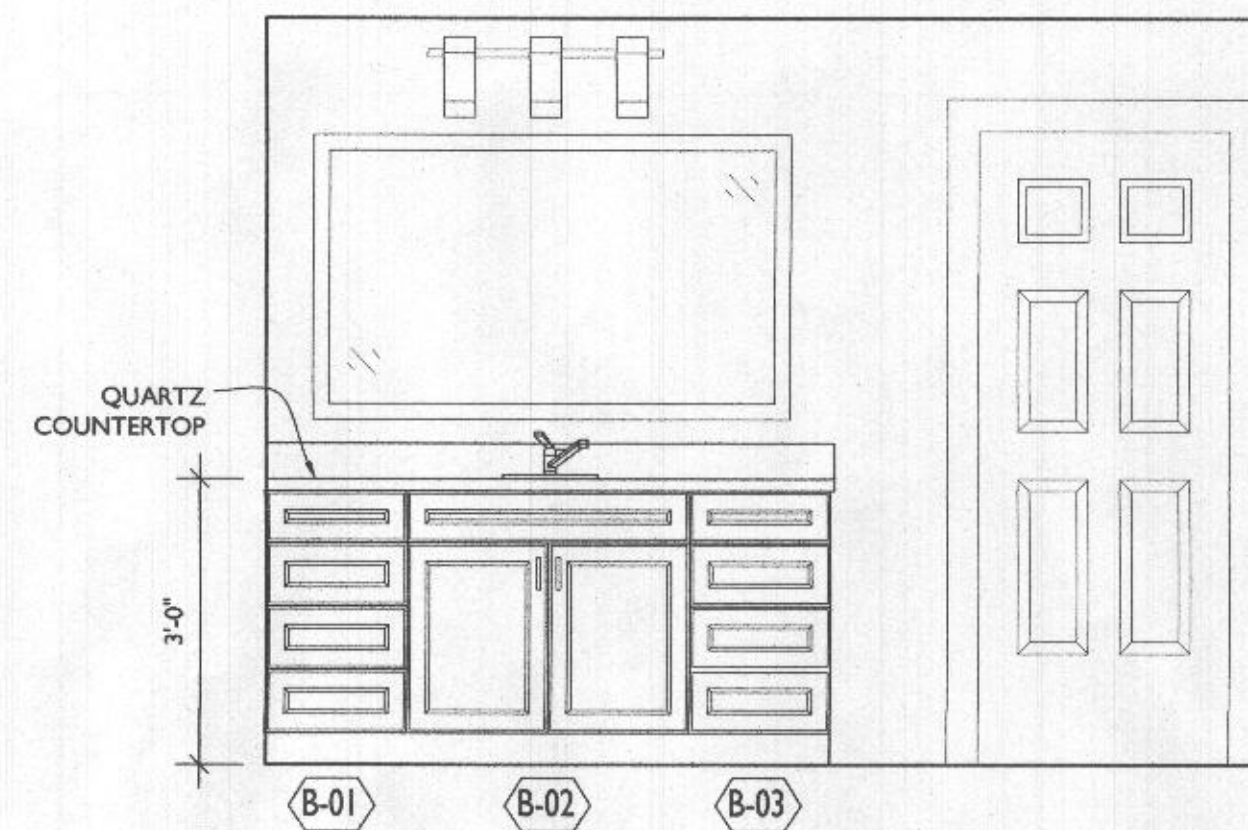
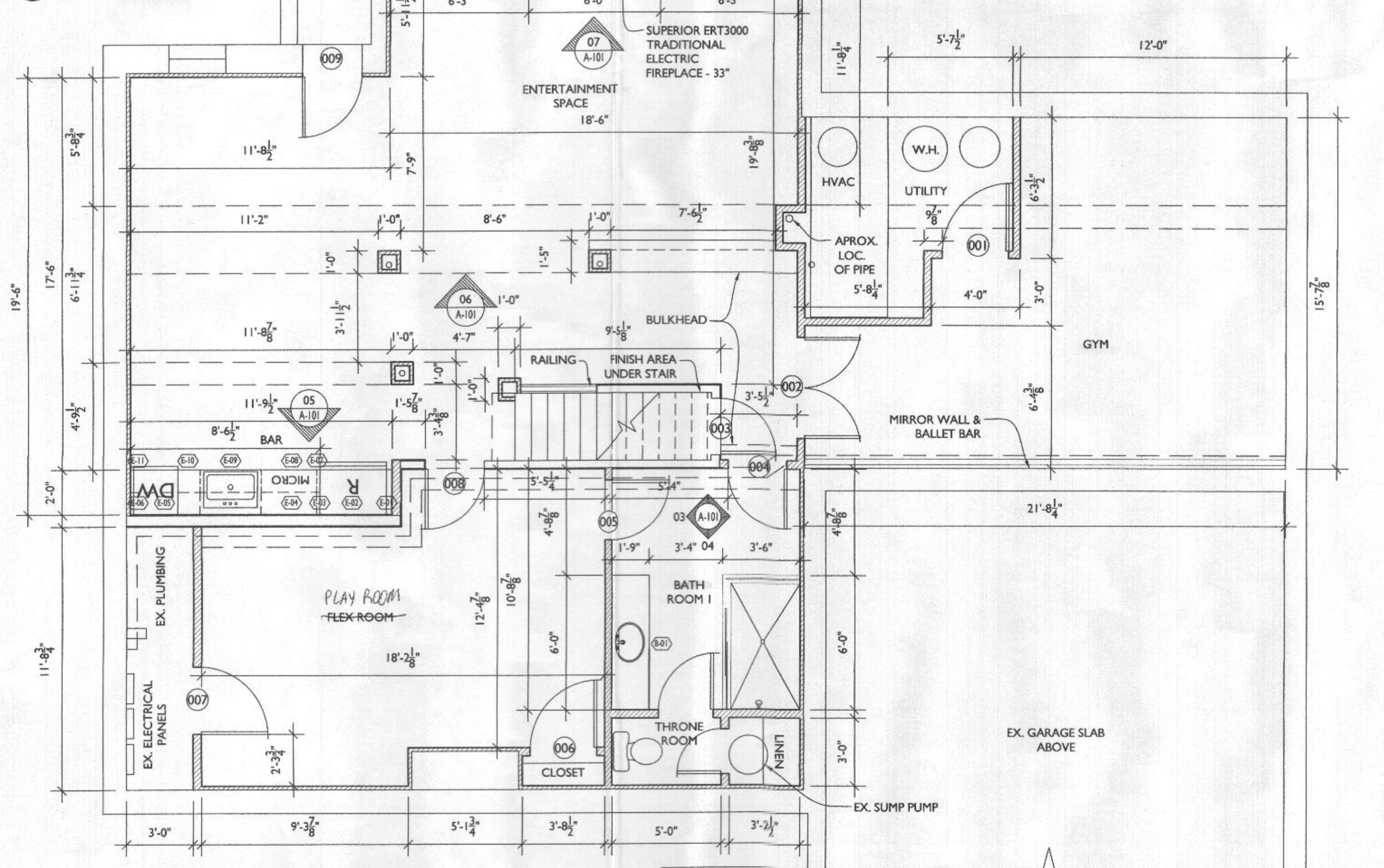
SITE PLAN

SCALE: AS NOTED	DATE: 12-03-21	PROJECT: 21-581
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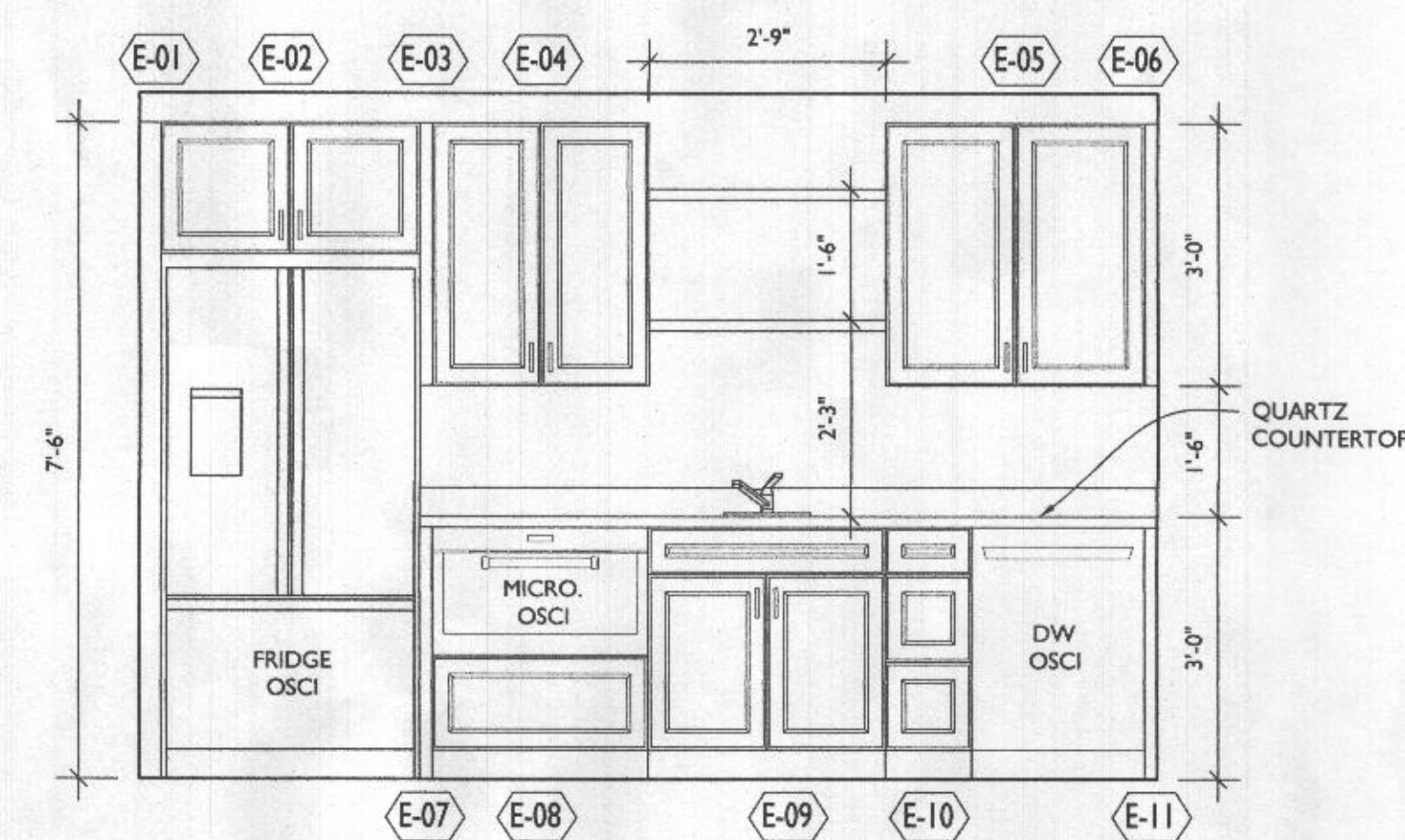
1
A101
2ND FLOOR PLAN
SCALE: 1/4"=1'-0"



02
A101
BASEMENT FLOOR PLAN
SCALE: 1/4"=1'-0"

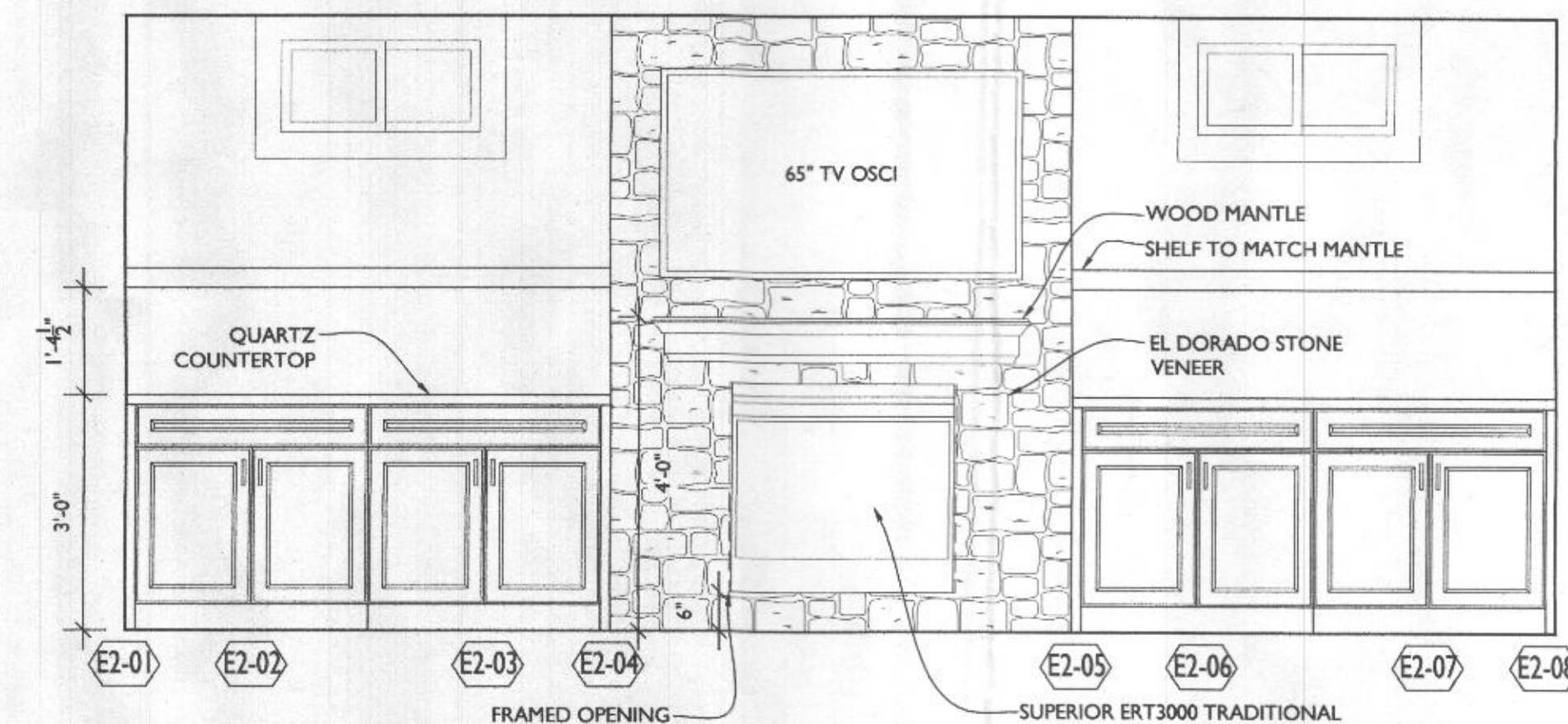


03
A101
BATH I VANITY WALL INT. ELEVATION
SCALE: 1/2"=1'-0"

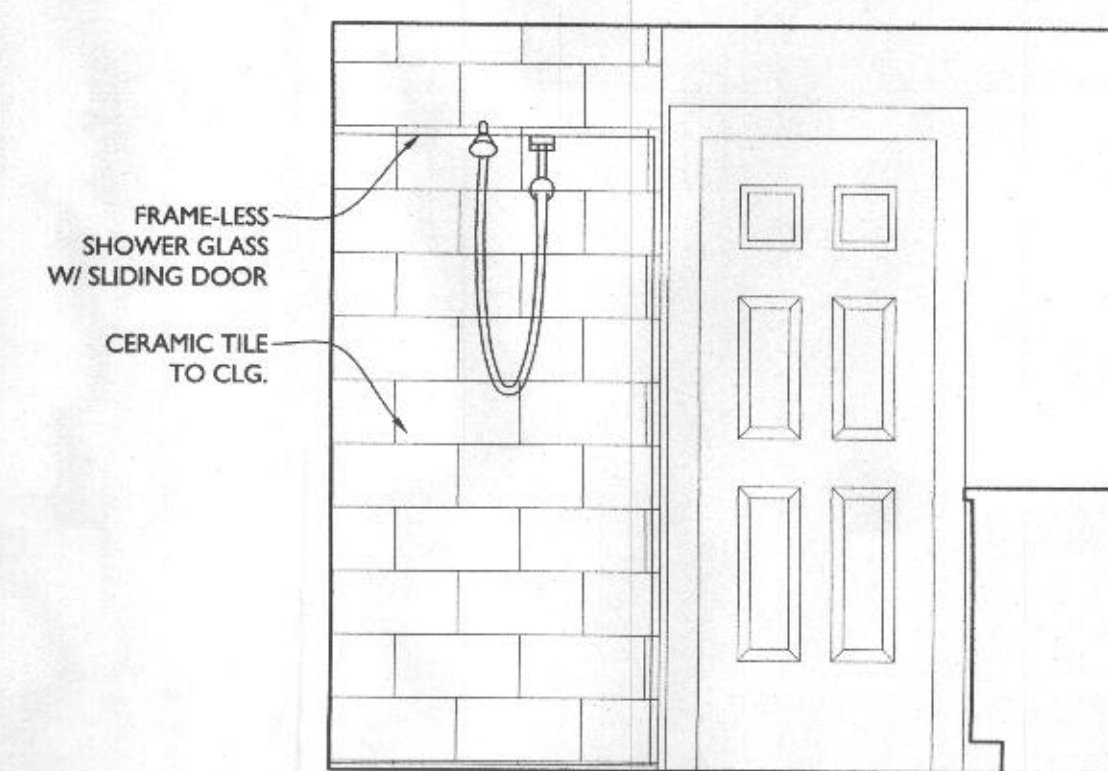


05
A101
BAR INT. ELEVATION
SCALE: 1/2"=1'-0"

06
A101
BAR SEATING INT. ELEVATION
SCALE: 1/2"=1'-0"



07
A101
FIREPLACE INT. ELEVATION
SCALE: 1/2"=1'-0"



04
A101
BATH I SHOWER WALL INT. ELEVATION
SCALE: 1/2"=1'-0"

LINE TYPE KEY:

- NEW WALL
- EXIST. WALL
- ABOVE LINE
- FDN. WALL

TYPICAL WALL CONSTRUCTION U.N.O.
TYP. INT. WALL CONSTR.: 2x4 WOOD STUDS U.N.O. @ 16" O.C. W/ 1/2" DRYWALL EACH SIDE



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301-776-2666

info@TransformingArchitecture.com
www.TransformingArchitecture.com



STAMP

I CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A DULY LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NUMBER 13662, EXPIRATION 10-22-2023.

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PROJECT PHASE

PERMIT

PROJECT TITLE

THE HOOVER RESIDENCE

2864 Rolling Fork Way
Glenwood, MD 21738

REVISIONS

SYMBOL	DATE	ISSUED FOR

PROJECT NUMBER 21-581

DATE 12/3/2021

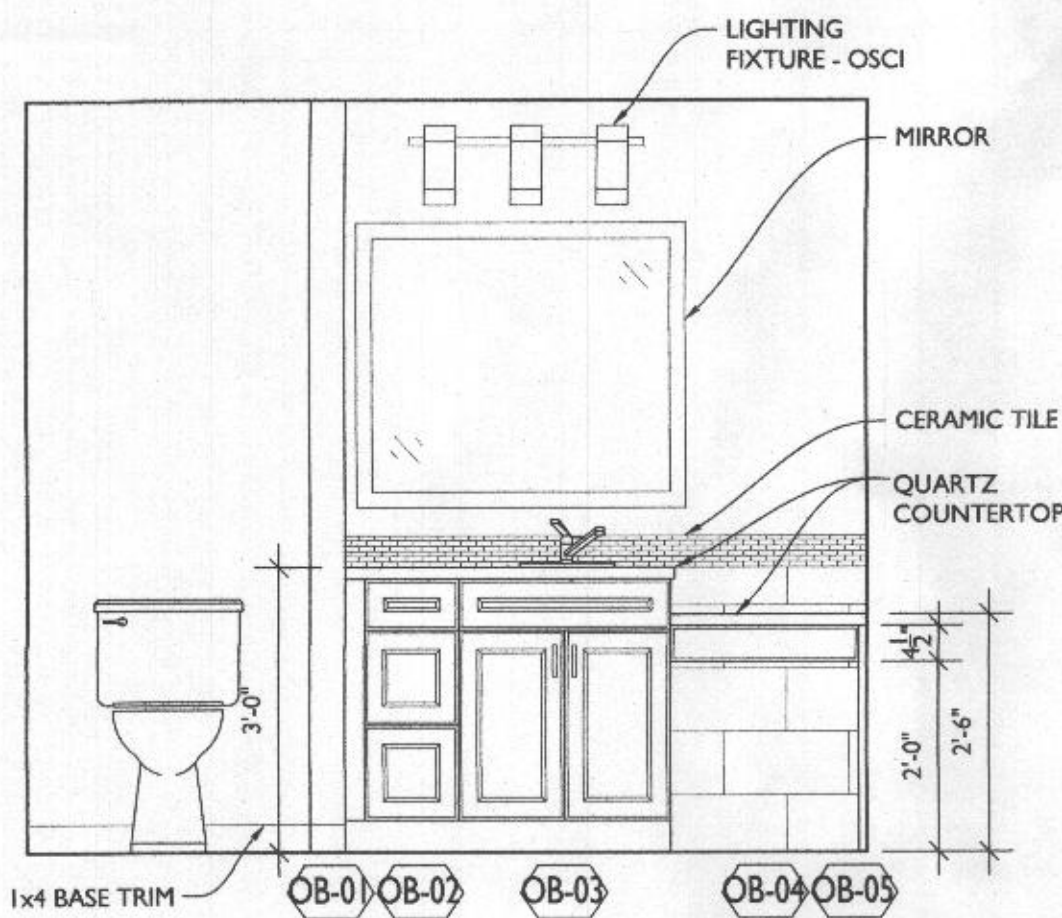
SCALE AS NOTED

DRAWING TITLE

FLOOR PLANS + INTERIOR ELEVATIONS

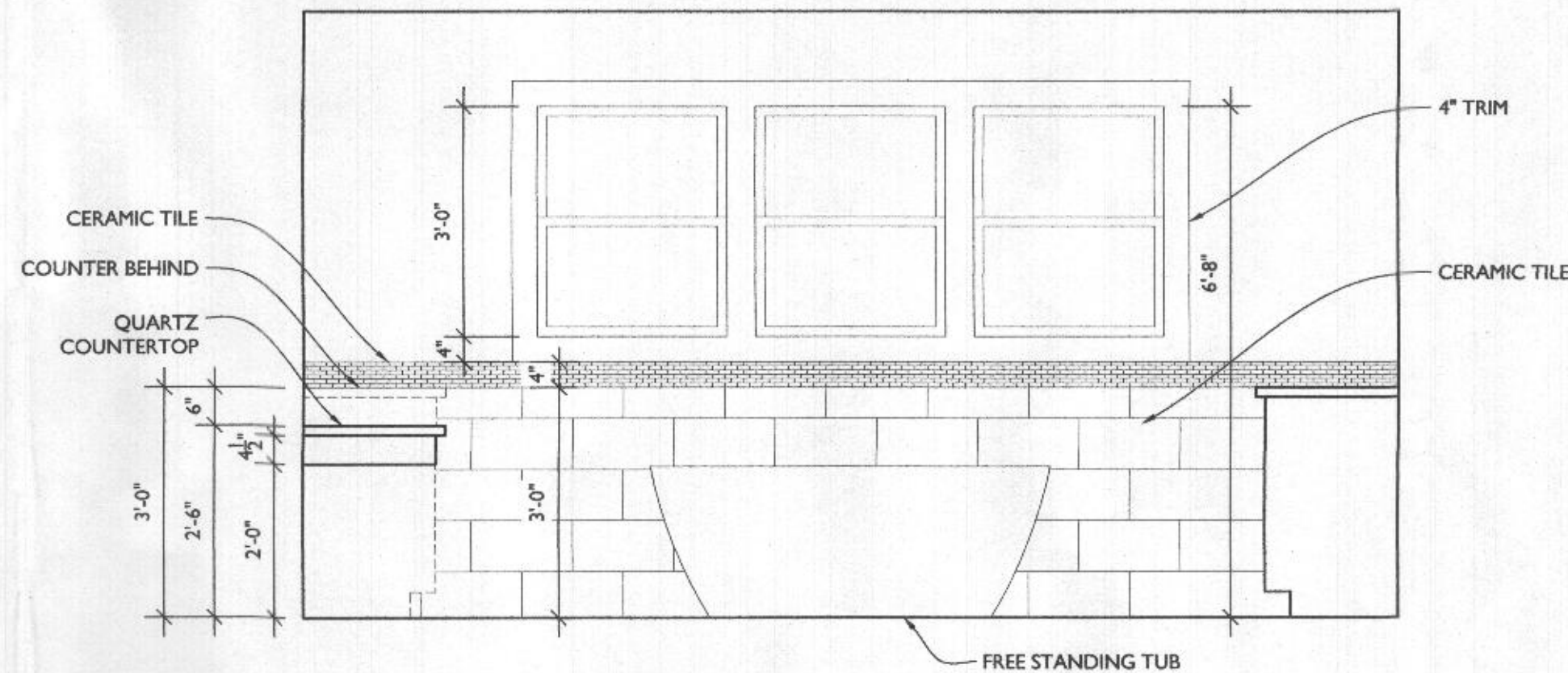
SHEET NUMBER

A-101



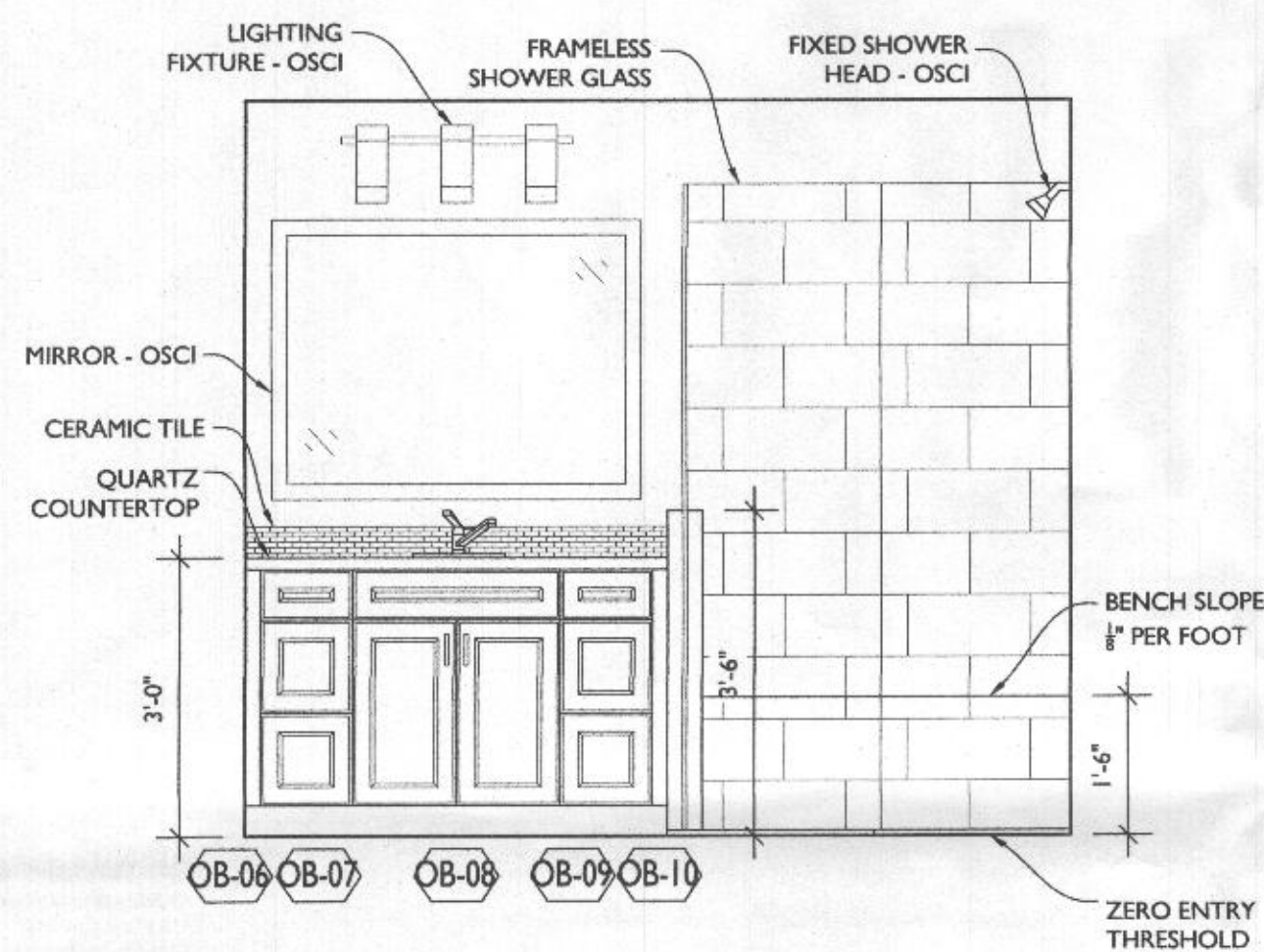
**OWNERS BATH VANITY
INT. ELEVATION**

SCALE: 1/2"=1'-0"



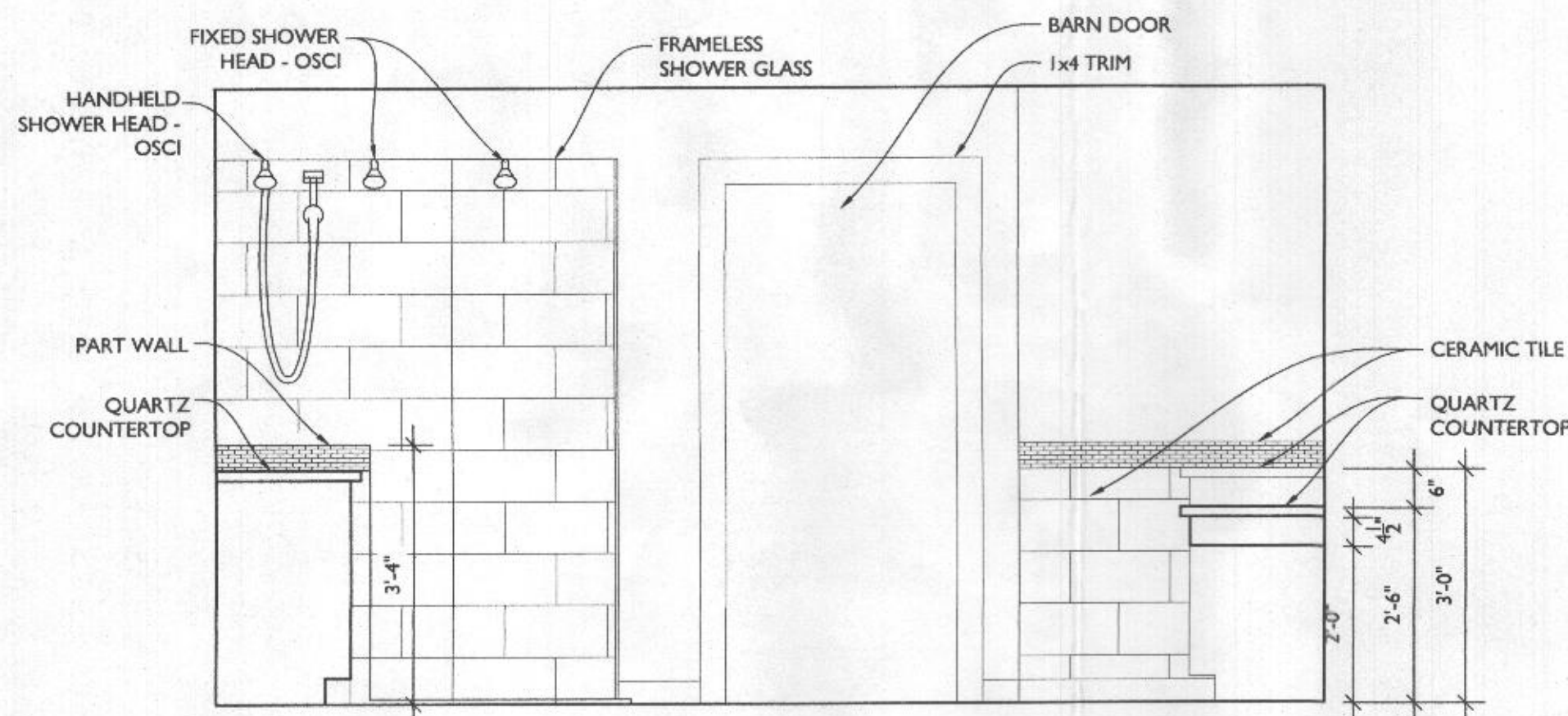
**OWNERS BATH TUB WALL
INT. ELEVATION**

SCALE: 1/2"=1'-0"



**OWNERS BATH VANITY
INT. ELEVATION**

SCALE: 1/2"=1'-0"



**OWNERS BATH SHOWER WALL
INT. ELEVATION**

SCALE: 1/2"=1'-0"

LINE TYPE KEY:

NEW WALL: [Solid line]

EXIST. WALL: [Dashed line]

ABOVE LINE: [Line with dots]

FDN. WALL: [Hatched area]

TYPICAL WALL CONSTRUCTION U.N.O.

TYP. INT. WALL CONSTR.: 2x4 WOOD STUDS U.N.O. @ 16" O.C. W/ 1/2" DRYWALL EACH SIDE

ELECTRICAL LEGEND

- \$ SWITCH
- OUTLET
- GFI OUTLET
- RECESSED LED CLG. LIGHT
- LED WALL MOUNT FIXTURE
- ⊗ LED CLG. FIXTURE
- ⊗ EXHAUST FAN WITH HUMIDISTAT
- ⊗ CLG. FAN W/ LIGHT
- TV CABLE TV
- SD HARDWIRED SMOKE DETECTOR W/INTERAL BATTERY & CARBON MONOXIDE DETECTOR (COMBINED UNIT)
- S SPEAKER

ELECTRICAL NOTES:

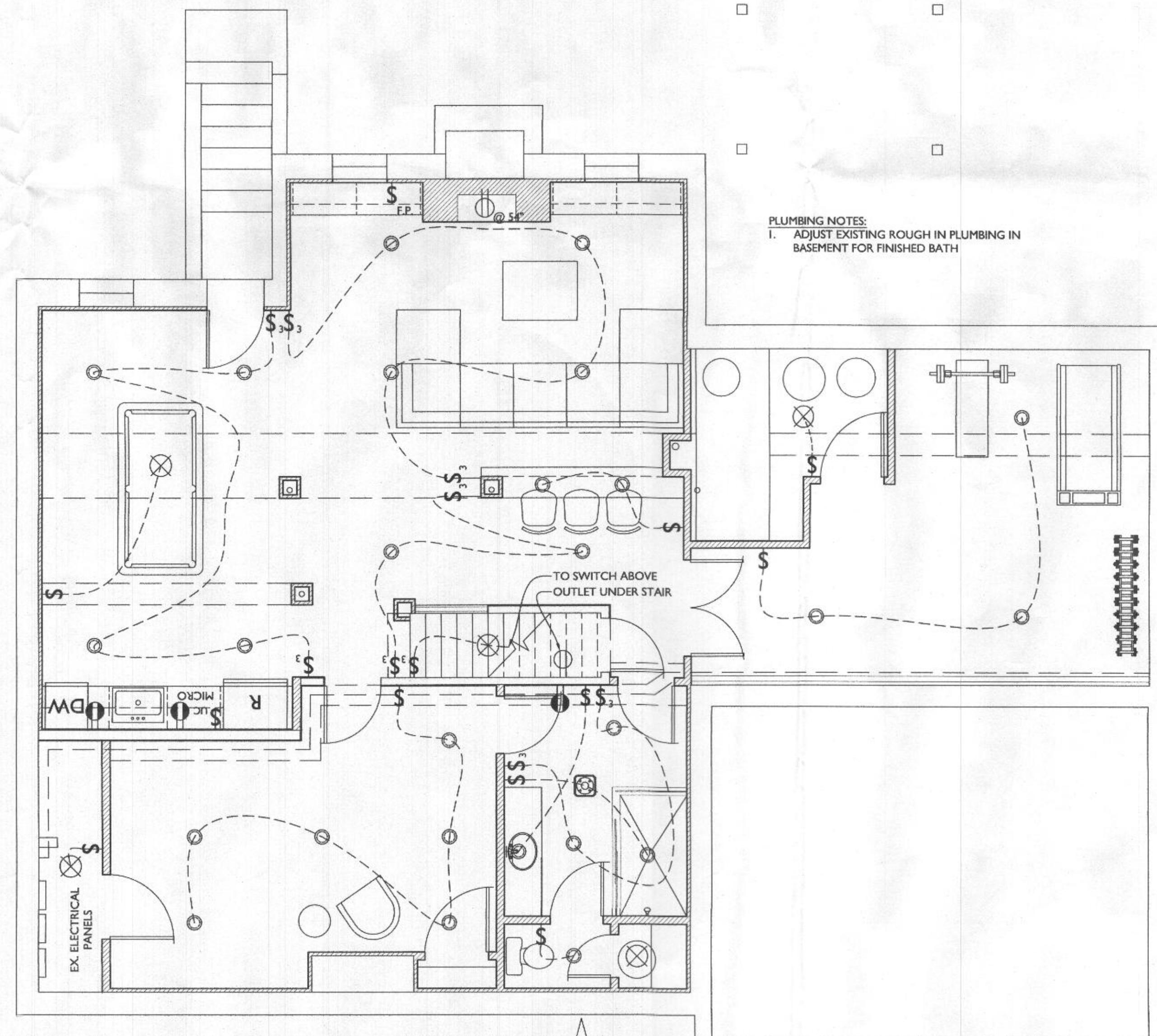
1. OUTLETS PER CODE @ 18" H, 42" H ABOVE COUNTERTOPS UNLESS OTHERWISE NOTED
2. MOUNT LIGHT SWITCHES @ 42" H. MAX. ROCKER-TYPE
3. PROVIDE HARD-WIRED SMOKE DETECTORS PER CODE
4. PROVIDE UNDER-CABINET LIGHTING
5. HINGE SWITCHES IN ALL CLOSETS U.N.O.
6. ALL FIXTURES ON DIMMERS
7. CARBON MONOXIDE ALARMS SHALL BE INSTALLED IN ACCORDANCE WITH SECTION R315 OF THE 2018 IRC
8. INSTALL PROPANE FIREPLACE IN BASEMENT

**OWNERS SUITE BATHROOM
ELECTRICAL PLAN**

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

PLUMBING NOTES:

1. ADJUST EXISTING ROUGH IN PLUMBING IN BASEMENT FOR FINISHED BATH



ELECTRICAL PLAN

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



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PROJECT PHASE

PERMIT

PROJECT TITLE

**THE
HOOVER
RESIDENCE**

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Glenwood, MD 21738

REVISIONS

SYMBOL	DATE	ISSUED FOR

PROJECT NUMBER 21-581

DATE 12/3/2021

SCALE AS NOTED

DRAWING TITLE

**ELEC. PLANS +
NOTES + INT.
ELEVATIONS**

SHEET NUMBER

A-102