

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:

	B14000164
Permit No.:	4214000104

Building Address: (0819 Winds	ing Stream Ln	Property Owner's Name: 5k Llones	T Highland Owners LLC	
Building Address: (0819 Winds	and Zin Code: 20777	Property Owner's Name: 5k Llones of Highland Ownys Lice Address: 7090 Samuel morse Do		
Suite/Apt. #SDP/		City: Columbia State: md Zip Code: 21046 Phone: Fax:		
1			^	
Census Tract:	Subdivision: Owing property	4		
Section:Area:	:Lot:_/0	Applicant's Name & Mailing Address, (If ot Applicant's Name: Char	her than stated herein)	
Tax Map: 40 Parcel:_	99 Grid: 9	5 Address 10 1563 1757	1	
Zoning: Map Coordinate	es: Lot Size:	Phone: 447-340-1209 Fax:		
Existing Use: 540		Email: JOREMY ENAPPLIED	ndapproved con	
Proposed Use: SPD W/ PIODO	ne tenk	Contractor Company: Valley NATI	orest Cray	
Estimated Construction Cost: \$ 600		Contact Person: William Greenig		
Description of Work:		Address: 7201 montevides		
	1	- City: JESSUP State: Mol		
Install 500 gallon	10-6 wind hopen	License No. : <u>(67793</u>		
-tank		Phone: <u>410-799-1114</u> Fax:		
Occupant or Tenant:		Cilidii.	V	
Was tenant space previously occupied?	□Yes □No	Engineer/Architect Company:		
Contact Name:		Responsible Design Prof.:		
Address: COTTructor				
City:S				
Phone:	Fax:	_ Phone:Fax:		
Email:		Email:		
Commercial Building Characteristics	Residential Building Characteristics	. Utilities		
Height:	☐ SF Dwelling ☐ SF Townhouse	Water Supply		
No. of stories:	Depth Width	Public .		
Gross area, sq. ft./floor:	1 st floor: 2 nd floor:	Private		
Area of construction (sq. ft.):	Basement:	Sewage Disposal		
Area or construction (sq. 1c.).	☐ Finished Basement	□ Public .		
Use group:	☐ Unfinished Basement	Private		
333	☐ Crawl Space	Electric: Yes No		
Construction type:	☐ Slab on Grade			
☐ Reinforced Concrete	No. of Bedrooms:	Gas: Yes No		
☐ Structural Steel	Multi-family Dwelling	<u>Heating System</u>		
☐ Masonry	No. of efficiency units:	☐ Electric ☐ 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 Permit	Footings:	_		
□Yes □No	Roof:	Grading Permit Number:		
Roadside Tree Project Permit #	☐ State Certified Modular			
L	☐ Manufactured Home	Building Shell Permit Number:		
WITH ALL REGULATIONS OF HOWARD COUNTY WITHIS APPLICATION (5) THAT HE/SHE GRANTS COUNTY WITHIN APPLICATION (5) THAT HE/SHE GRANTS COUNTY (6) THAT HE/SHE GRANTS (6) THAT HE/SHE GRAN	HICH ARE APPLICABLE THERETO; (4) THAT HE/S	1/14/14	PERTY NOT SPECIFICALLY DESCRIBED IN	
Title/Company		*	e po e	
<u></u>	**PLEASE WRITE	OF FINANCE OF HOWARD COUNTY NEATLY & LEGIBLY** FICE USE ONLY-	and read	
AGENCY DATE SIG	SNATURE OF APPROVAL DPZ SETB	ACK INFORMATION Filing Fee	\$ 10.00	

Building Officials PSZA (Zoning) PSZA (Engineering) Health

Health) 18 14 Assumed to the last sediment Control approval required for issuance? ☐ CONTINGENCY CONSTRUCTION START

White: Building Officials

Green: PSZA,Zoning

Yellow: PSZA,Engineering

Is Entrance Permit Required? ☐ Yes ☐ No

All minimum setbacks met?

SDP/Red-line approval date:

Lot Coverage for New Town Zone:

Rear:

Side:

Side St.:

Historic District?

Check Pink: Health

☐ Yes ☐ No

☐ Yes ☐No

Tech Fee

Excise Tax PSFS

Guaranty Fund

Sub- Total Paid

Balance Due

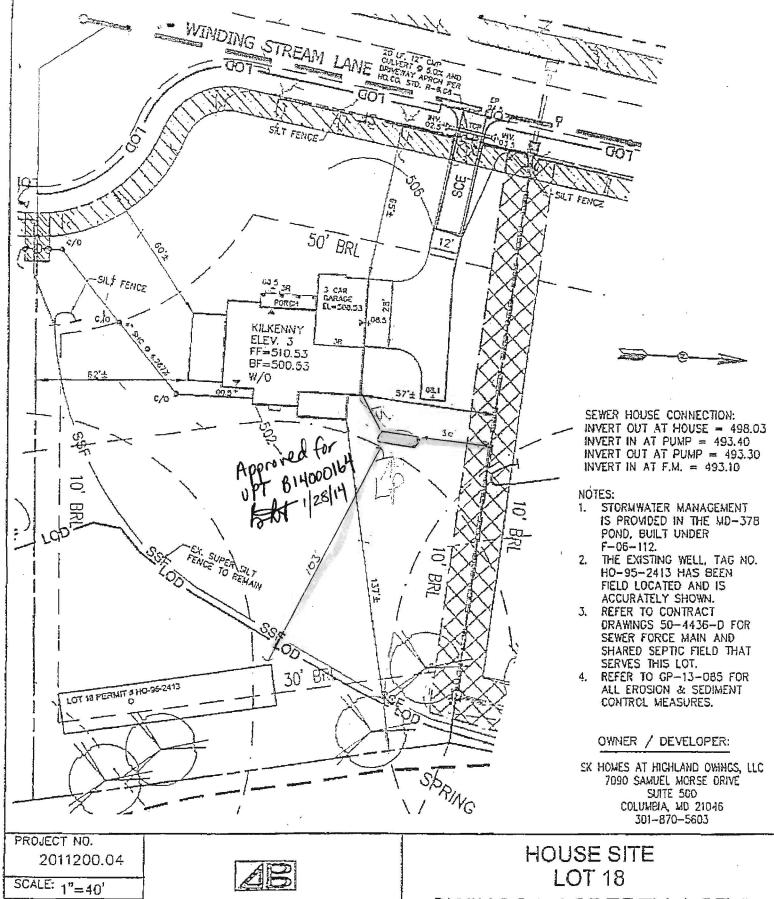
Add'l per Fee

Total Fees

Gold: SHA

State Highways

Distribution of Copies:



CHECKED BY: SBP

DRAWN BY:

10/15/13

AB CONSULTANTS, INC.

9450 ANNAPOLIS ROAD LANHAM, MARYLAND 20706 PHONE: (301) 306-3091 FAX: (301) 306-3092

OWINGS PROPERTY, LOT 5

LOTS 17-24, HON-EUILDABLE PRESERVATION
PARCELS F & G, AND NON-BUILDABLE BULK PARCEL H
A RESUBDIMISION OF LOT 5 - HARWOOD OWINGS PROPERTY
TAX MAP 40, GRID 4, PARCEL 44
5TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND.



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: 9/24/13

Permit No.: B1300 3598

DIOTAL.	7.1				
Building Address: (QD.L.A.VV)	ding Stream Law	e	Property Owner's Name: SK Homes@ H:	ighlands Owings	
City: Highlands State:	MD Zip Code: 207	77	Address: 7090 Samuel Morse Dr.	71 0:4: 210//	
Sulte/Apt. # SDP/WP/BA #: GP13-085			City: Columbia State: MD Zip Code: 21046 Phone: 410312-5163 Fax: 410-312-4708		
			Email: porla@comcast.net	4111-317-47118	
Census Tract:					
Section: n/a Area	:_ n/a Lot:_/8		Applicant's Name & Mailing Address, (if other		
Tax Map: 40 Parcel:			Applicant's Name: BPS, Inc Pat On	rla	
· · · · · · · · · · · · · · · · · · ·		• 1	Address: 232-D Crocker Dr.	The Codin page 4	
Zoning: Map Coordinat	es: Lot Size: _		City: Re 1 A1r State: MD Phone: 410-879-7848 Fax: 410-	Zip Code: 21014 -879-7847	
			Email: porla@comcast.net	0/ 5- 7047	
Existing Use: Vacant lot	_ 		cmail: Possession		
Proposed Use: SED			Contractor Company: same as owner		
Estimated Construction Cost: \$ 200; (200 00 - Homber To	10,54	Contact Person: Bill McElwee		
Estimated Construction Cost: \$ 200,0	" () () () () () () () () () (· · · · ·	Address:		
Description of Work: Const. SFD			City:State:	Zip Code:	
Full bant 3 FB, 14B(4Brm Rm 3 C	ar	License No.: MHBR# 557	·	
Attchack Gar Opt FP FI			Phone:Fax:		
XITTEMAN GOT, UPETI, FI	C/~ MICH		Email:		
Occupant or Tenant:					
Was tenant space previously occupied?	□Yes	□No	Engineer/Architect Company:		
			g-and-manner and control of the cont		
Contact Name:			Responsible Design Prof.:		
Address:			Address:		
City:	State: Zio Code:		City: State: Z		
Phone:	rax:		Phone: Fax:		
Email:			Email:		
				THE RESIDENCE OF THE PROPERTY OF THE PARTY O	
Commercial Building Characteristics	Residential Building Char		Utilitles		
Height:	SF Dwelling SF Town		Water Supply	Sept.	
No. of stories:	Depth 1 floor:	Width	☐ Public		
Gross area, sq. ft./floor:	2 nd floor:		X Private	Company of the Compan	
Area of construction (sq. ft.):	Basement:		Sewage Disposal	54 (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	
Area of construction (sq. 1t.):	☐ Finished Basement		☐ Public	A STATE OF THE STA	
Use group:	Unfinished Basement		XX Private		
use group.	Crawl Space				
Construction type:	☐ Slab on Grade		Electric: XIXI Yes No		
			Gas: Yes XX No	The state of the s	
Reinforced Concrete	No. of Beardoms:	- 11			
☐ Reinforced Concrete ☐ Structural Steel	No. of Bedrooms: Multi-family Dwel	lina	Heating System		
	No. of Bedrooms: Multi-family Dwel No. of efficiency units:	ling	Heatina System		
☐ Structural Steel	Multi-family Dwel	ling			
☐ Structural Steel ☐ Masonry	Multi-family Dwel No. of efficiency units:	ling	☐ Electric ☐ Oil	1573 1578	
☐ Structural Steel ☐ Masonry ☐ Wood Frame	Multi-family Dwel No. of efficiency units: No. of 1 BR units:	ling	☐ Electric ☐ Oil ☐ Natural Gas █ Propane Gas ☐ Other:		
☐ Structural Steel ☐ Masonry ☐ Wood Frame	Multi-family Dwel No. of efficiency units: No. of 1 BR units: No. of 2 BR units: No. of 3 BR units: Other Structure:	ling	☐ Electric ☐ Oil ☐ Natural Gas		
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☐ Structural Steel ☐ Masonry ☐ Wood Frame ☐ State Certified Modular ○ Roadside Tree Projects Crinit	Multi-family Dwel No. of efficiency units: No. of 1 BR units: No. of 2 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof:		☐ Electric ☐ Oil ☐ Natural Gas	313000&82_	
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Structural Steel Masonry Wood Frame State Certified Modular Roadside Tree Projects Certified The Undersigned Hereby Certifies and Agar with All Regulations of Howard Country This Applicant's Signature porla@comcast.net Email Address Ageng for Steuart Kret Title/Company AGENCY State Highways Building Officials PSZA (Zoning) PPZA (Engineering) Health Date S	Multi-family Dwel No. of efficiency units: No. of 1 BR units: No. of 2 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof: Soft State Certified Modular Manufactured Home SES AS FOOTINGS: HOME STRUCTURE: Checks Payable to: Soft ISSUANCE? LYES NO	DIRECTOR OF F EASE WRITE NE DISTRIBUTION DISTRIBUTION DISTRIBUTION DISTRIBUTION DISTRIBUTION DISTRIBUTION DISTRIBUTION SIDE STANCE All minimum IS Entrance P Historic Distribution Lot Coverage	Electric	RARECT; (3) THAT HE/SHE WILL COMPLY ERTY NOT SPECIFICALLY DESCRIBED IN ED AND POSTING NOTICES. CEIVED 2 4 2013 ES & PERMITS NVISION \$ 1 00 00 \$ 5 \$ 1 5 Ind \$ 50000 \$ 1 5 Ind \$ 5	
Structural Steel Masonry Wood Frame State Certified Modular Paragraphic Project Project Paragraphic Project Project Paragraphic Project Pro	Multi-family Dwel No. of efficiency units: No. of 1 BR units: No. of 2 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof: State Certified Modular Manufactured Home SES AS FOLLOWS: (1) THAT HE/SHE IS WHICH ARE APPLICABLE THERETO; (UNITY OFFICIALS THE RIGHT TO ENTE	DIRECTOR OF F EASE WRITE NE FORT OF THIS PROPE DISTRIBUTION DISTRIBUTION DISTRIBUTION DISTRIBUTION DISTRIBUTION DISTRIBUTION SIDE SIDE SIDE SL: All minimum IS Entrance P Historic Distri Lot Coverage SDP/Red-line	Electric	RRECT; (3) THAT HE/SHE WILL COMPLY ERTY NOT SPECIFICALLY DESCRIBED IN ED AND POSTING NOTICES. CEIVED 2 4 2013 ES & PERMITS NVISION \$ 1 00 00 \$ 5 \$ 1 5 Ind \$ 500000000000000000000000000000000000	

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13SET 1027

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

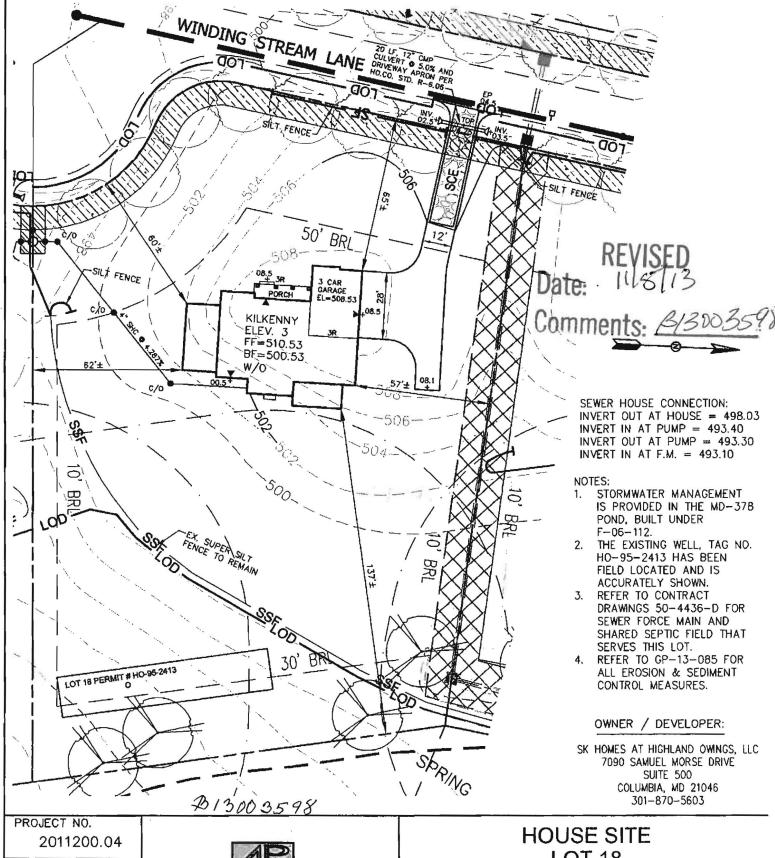
Date: To: From: Subject:	Health Dept. Roll Bucker (Person's Name and Division) Pat Drla (4/10) 879-7848 (Your Name, Company Name and Telephone Number) Project name Dwings Property Project site address Permit Number 3/300354 3558 Other information pertinent to this project
✓ Please check	the attachments below that you are submitting with this transmittal:
Letter	of response to Howard County plan review code letter
Revise	d plans and/or revised details: When submitting for a complete re-review, duplicate sets shall be submitted.
Structu	ural steel certification
Energy	y conservation calculations
Certifi	cation for (be specific).
Copies	s of (be specific).
	ets of single family dwelling model plans to be placed on permanent file: Model name and/or #
X Other	Site Hans for Heath Dept.
Is there	e anyone else that should be contacted regarding this project if there are questions?
If so,	please list that person's name and telephone number below:
\mathcal{B}_{i}	11 Elwee (410) 312-5163
(Perso	n's name) (Telephone number)

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY <u>SIGNED AND SEALED</u>, 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. 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 All

white: Plan Review Division yellow: Applicant pink: Permit Division

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SCALE: 1"=40'

10/15/13 DRAWN BY:

GTH CHECKED BY:

SHEET: 1 OF 1



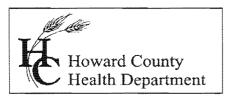
AB CONSULTANTS, INC.

9450 ANNAPOLIS ROAD LANHAM, MARYLAND 20706 PHONE: (301) 306-3091 FAX: (301) 306-3092

LOT 18

OWINGS PROPERTY, LOT 5

LOTS 17-24, NON-BUILDABLE PRESERVATION
PARCELS F & G, AND NON-BUILDABLE BULK PARCEL H A RESUBDIVISION OF LOT 5 - HARWOOD OWINGS PROPERTY TAX MAP 40, GRID 4, PARCEL 44 5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND.



8930 Stanford Blvd, Columbia MD 21045 (410) 313-2640 Fax (410) 313-2648 TDD (410) 313-2323 Toll Free 1-866-313-6300 website: www.hchealth.org

Maura J. Rossman, M.D., Health Officer

MEMORANDUM

TO:

Bill McElwee

SK Homes

FROM:

Heidi Scott

Well and Septic Program

Development Coordination Section

RE:

Plot Plan - B13003598

6819 Winding Stream Lane

Owings Property

DATE:

October 29, 2013

The following items must be addressed. Please revise and resubmit prior to building permit approval.

 A septic tank utilizing Best Available Technology will be required prior to the grinder pump. A B.A.T. site plan will be required with all of the necessary detail for installation will also be required.

Cc:

Faxed & SK Homes 10-29-13

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

Date:	5/9/14
To:	Syd
From:	(Person's Name and Division) Syd (Person's Name and Division) (Your Name, Company Name and Telephone Number) RECTIVED MAY 12 2014
Subject	
	Project site address 6319 winding streem in Highland 2007 Permit Number 814000 164 SDP#
	Permit Number
	Other information pertinent to this project
✓ Pleas	se check the attachments below that you are submitting with this transmittal:
	Letter of response to Howard County plan review code letter
	Revised plans and/or revised details: When submitting for a complete re-review, duplicate sets shall be submitted.
	Structural steel certification
	Energy conservation calculations
	Certification for (be specific).
	Copies of (be specific).
	Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or #
\checkmark	Other Revise Trank Size From 500 gallon +0 1000 gallon (5and weation)
	Is there anyone else that should be contacted regarding this project if there are questions?
	If so, please list that person's name and telephone number below:
	(Person's name) (Telephone number)

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY <u>SIGNED AND SEALED</u>, 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. 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 ALT

CC: DPZ: De D Health At 5/28/14

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STEUART KRET HOMES **OPTION SHEET**

FOR CO	NSTRUCTION PURPOSES ONLY			
Subdivision	HIGHLAND			
Homeowner	Rahul and Shikha Khosla			
Lot Number	18 – 6819 Winding Stream Lane, Highland,			
Lot I tamoer				
	Maryland 20777			
Model	Kilkenny Ev. 3 Brick Front			
	3-Car Sideload Garage			
Color Package	#5 – Mesa Verde Brick / Silver Ash Siding /			
Color I deside	Driftwood Roof / Tuxedo Shutters			
DEVICENCE CENTER OPEN 40				
REVIEWED SEPTEMBER 19	2, 2013			
STRUCTURAL OPTIONS 1. 9' poured wall walkout basement				
Morning Room				
3. First Floor In-law Suite w/Bedroom	#3 and #4 Extension			
4. 3-Car Brick Sideload Garage	IIJ WIGHT DATOHSION			
5. Finished Rec, Full Bath, Den and Ex	xercise Room in lower level			
6. Finished In-law Suite at lower level				
7. Gas DV Fireplace in Family Room	with 1,000 gal. propane tank w/100 gal. fill			
8. Flagstone Porch w/Brick Strings and				
9. 9' ceilings at 1st and 2nd floors				
	nds, painted strings and risers with oak brackets			
KITCHEN				
1. UPG #3 Cabinets (Cardell Elan Raised Panel Cherry)				
2. Level #3 Granite Kitchen Countertop				
3. Level #1 Kitchen Bar Top				
4. Vent range to outside				
PLUMBING 1. UPG #3 Kitchen Faucet				
2. UPG #1 Bath Faucets				
3. Laundry Tub				
4. Wetbar rough-in (hot and cold) in lo	ower level in-law suite			
5. UPG #1 Pedestal Sink/ Toilet/ Mirro				
ELECTRICAL				
1. 2 Flood Lights P5203-30				
2. 2 pre-wires with two switches				
3. Two exterior garage lights				
4. Duplex in ceiling of lower level in-l				
	evel in-law suite (relocated per drawing) switched per pair			
6. 4 additional recessed lights in Libra				
7. 4 additional recessed lights in Family Room (keep fan rough-in) 8. 4 additional recessed lights in In-Law Suite 1 st Floor				
9. 4 recessed lights in Owner's Suite w/separate switch from sitting room				
10. 6 recessed lights in Bed #3 (switched per pair)				
11. 6 recessed lights in Bed #4 (switched				
12. Post Lamp				
FLOORING				
1. UPG #1 Ceramic in Owner's Bath				
2. UPG Hardwood in 2 nd Floor Hall				
3. UPG Ceramic lower level in-law suite / Brixton / Laredo II				
OTHER				
1 Dlaste Cronita Finantasa Cumaund				

5-bedroom

1. Black Granite Fireplace Surround

Kilkenny

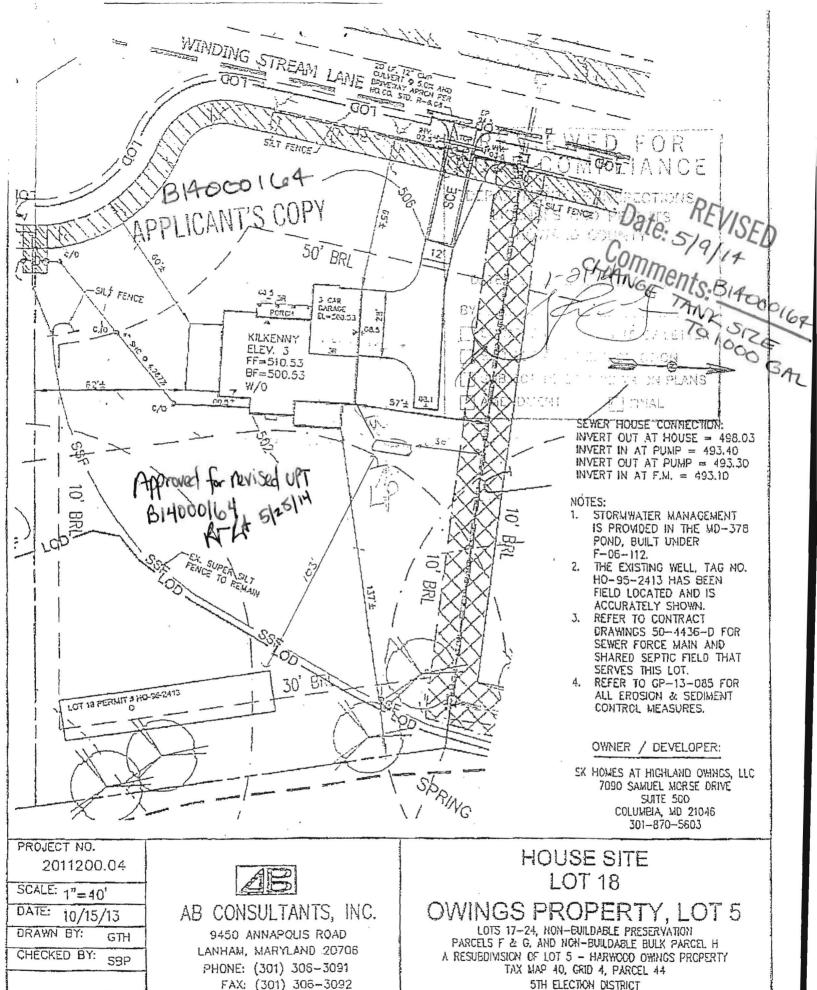


Lot 18 - Highland Elevation 3 - Brick

The location of recessed cans and all other custom modifications are subject to code & field conditions.

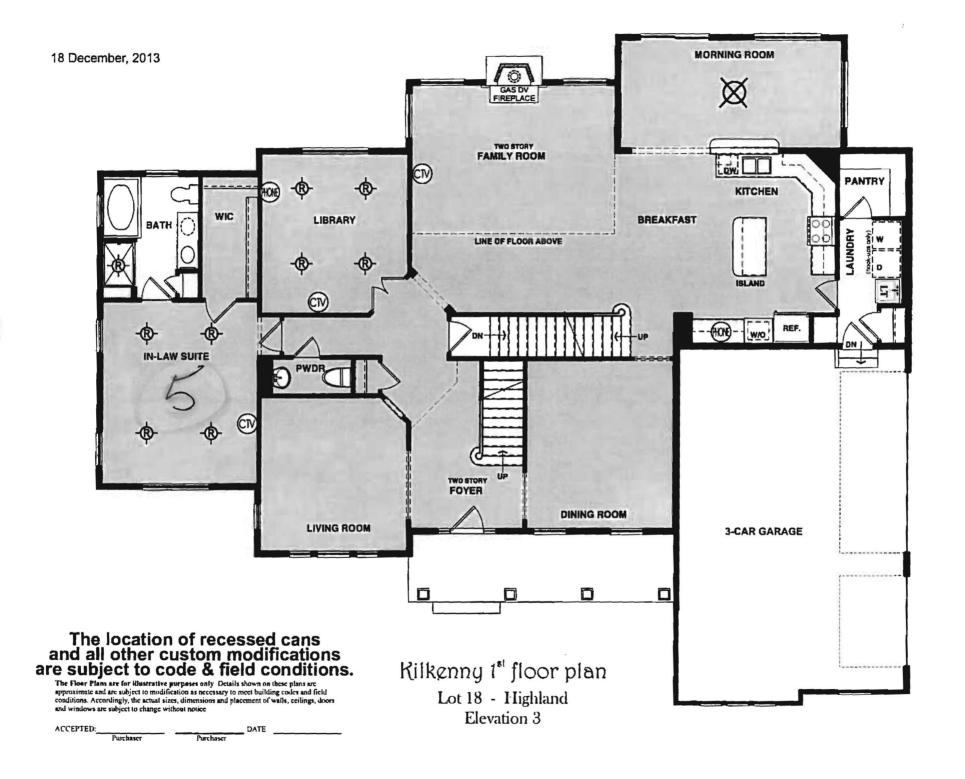
The Floor Plans are for illustrative purposes only. Details shown on these plans are approximate and are subject to modification as necessary to meet building codes and field conditions. Accordingly, the actual sizes, dimensions and placement of walls, ceilings, doors and windows are subject to change without notice.

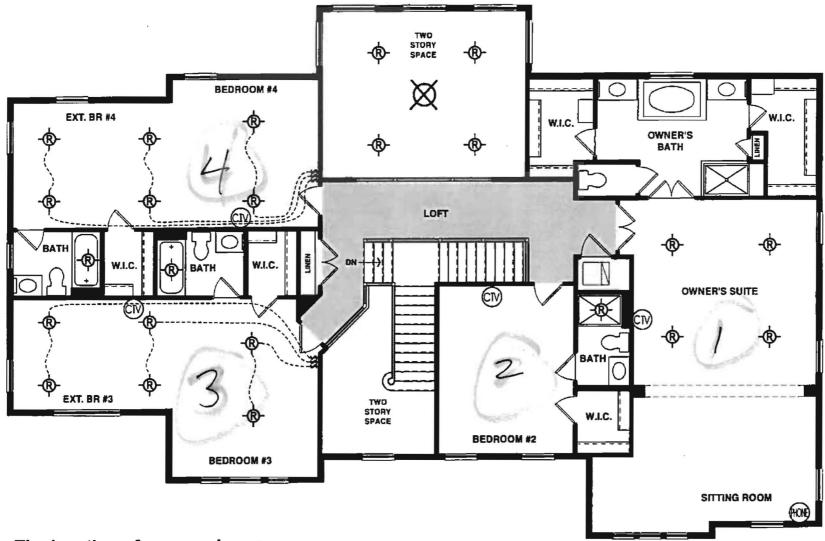
ACCEPTED			DATE	
	Purchaser	Purchaser		



HOWARD COUNTY, MARYLAND.

SHEET: 1 OF 1

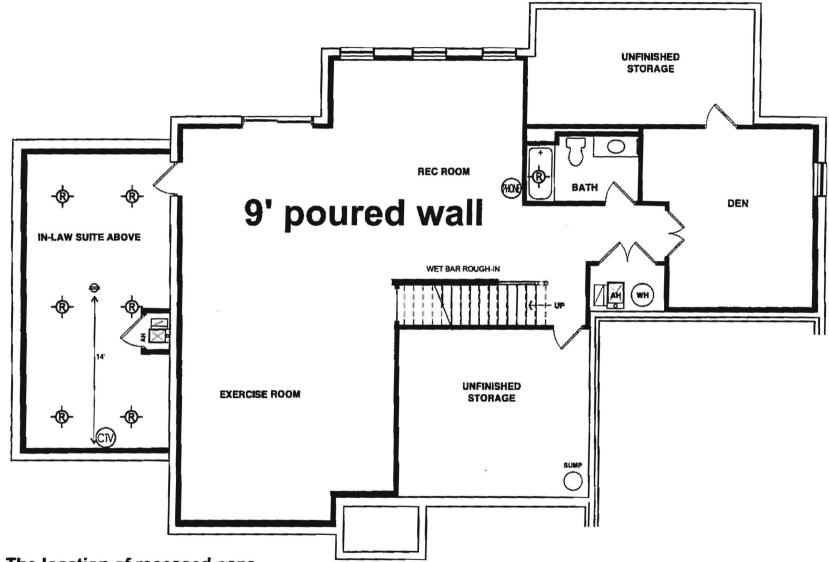




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ACCEPTED:			DATE	
	Purchaser	Purchaser		

Kilkenny 2nd floor plan Lot 18 - Highland Elevation 3



The location of recessed cans and all other custom modifications are subject to code & field conditions.

The Floor Plans are for Illustrative purposes only. Details shown on these plans are

The Floor Plans are for illustrative purposes only. Details shown on these plans are approximate and are subject to modification as necessary to meet building codes and field conditions. Accordingly, the octual sizes, dimensions and placement of walls, ceilings, doors and windows are subject to change without notice.

ACCEPTED:			DATE	
_	Purchaser	Purchaser		

Kilkenny basement plan

Lot 18 - Highland Elevation 3