



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: 9-30-14

Permit No.: B14003573

2902 Winterhazel Ct

Building Address: 15261 Sweetbriar St
 City: Woodbridge State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Wells Run
 Section: _____ Area: _____ Lot: 27
 Tax Map: 14 Parcel: 600 Grid: 20
 Zoning: _____ Map Coordinates: _____ Lot Size: 11200

Existing Use: SFD
 Proposed Use: SFD w/ porch
 Estimated Construction Cost: \$ 5000
 Description of Work: install 1200 sq ft porch on rear
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: L. Howard King Jr MD
 Address: 1802 Quince Rd
 City: Woodbridge State: MD Zip Code: 21797
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: John Chang
 Address: 7701 Marlinton Rd
 City: Jessup State: MD Zip Code: 21791
 Phone: 410-750-1111 Fax: _____
 Email: john@appliedapproval.com

Contractor Company: Valley Home & Remodeling
 Contact Person: John Chang
 Address: 7701 Marlinton Rd
 City: Jessup State: MD Zip Code: 21791
 License No.: 67793
 Phone: 410-750-1111 Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: Contractor
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	<u>Depth</u>	<u>Width</u>
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

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 Signature: _____ Print Name: John Chang
 Email Address: _____ Date: 9/30/14
 Title/Company: _____

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

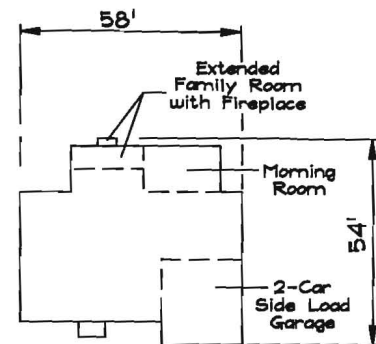
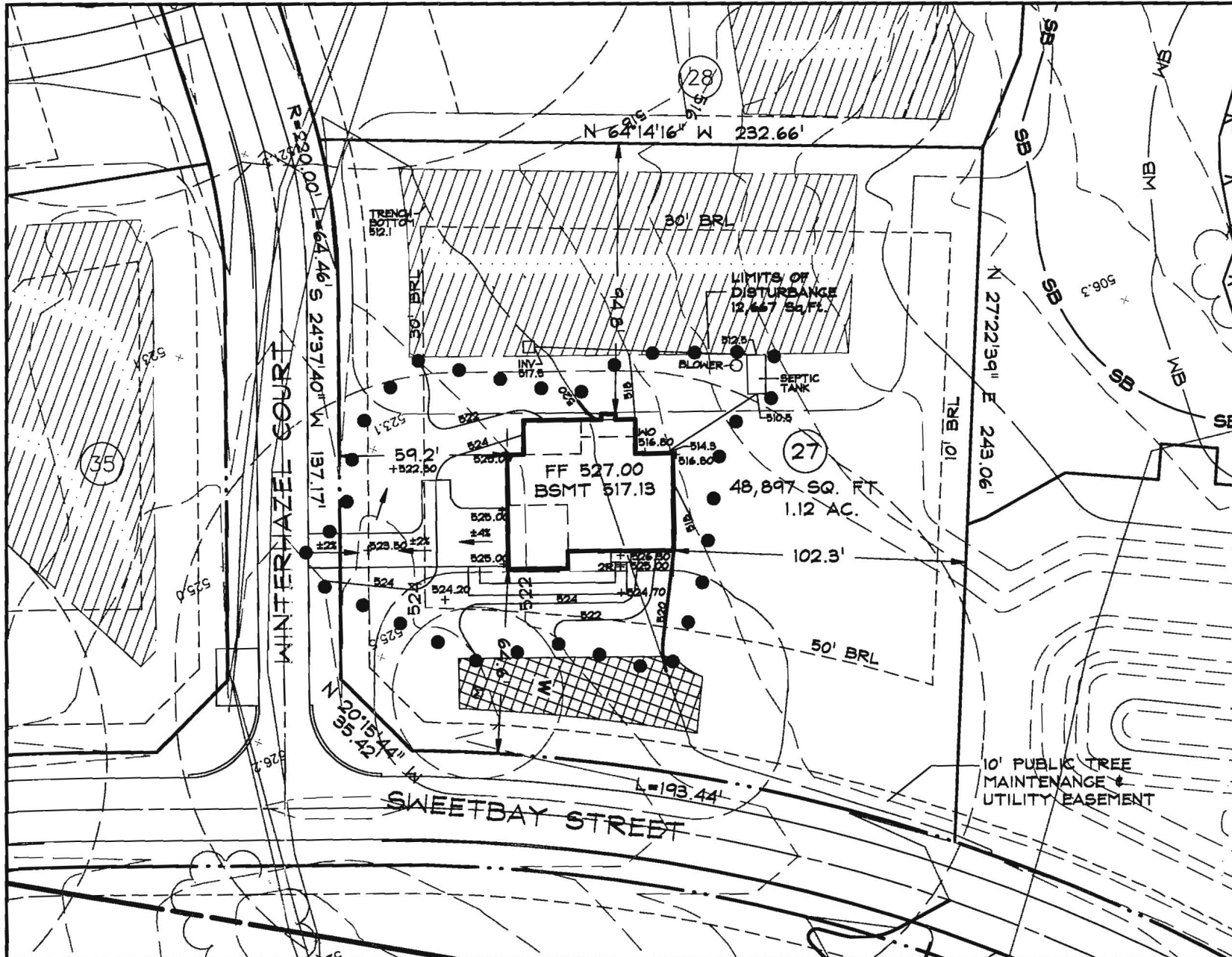
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>10/10/14</u>	<u>H. Oswald</u>

Is Sediment Control approval required for issuance? Yes No
 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 Zone: _____
 SDP/Red-line approval date: _____

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check #	<u>3547</u>



COLORADO
TRADITIONAL ELEVATION
BRICK FRONT, WALKOUT
REVERSE UNIT

GENERAL NOTES

1. THE EXISTING WELL SHOWN ON THIS PLAN (HO-95-0635) HAS BEEN LOCATED BY DDC, PROFESSIONAL LAND SURVEYOR, AND IS ACCURATELY SHOWN.
2. BASE SQUARE FOOTAGE OF HOUSE: 3,486 sq. ft. NUMBER OF BEDROOMS: 4
3. INFORMATION SHOWN ON THIS PLAN BASED ON PLANS PREPARED BY DMW DATED 6/25/07. EXISTING TOPOGRAPHY BASED ON GRADING PLAN PREPARED BY DEMARIO DESIGN CONSULTANTS DATED 7/9/07 AND FIELD RUN TOPOGRAPHY PREPARED BY DDC

Approved Septic System Plan
Howard County Health Department
\$14001788

4-Bedroom SFD
approved as shown
R. Buckey
Signature *6/18/2014*
Date

OWNER/BUILDER: K. HOVNAN HOMS
1802 Brightseat Road
Landover, Maryland 20785
(301)683-6268



Planners
Surveyors
Engineers
Landscape Architects
192 East Main Street
Westminster, MD 21157
410.386.0560
410.386.0564 (Fax)
DDC@DDCinc.us
www.DDCinc.us

DDC JOB#:	06116.5
DATE:	5/22/14
SCALE:	1" = 50'
DES. BY:	BKC
DRN. BY:	BKC
CHK. BY:	BKC

BELLE HAVEN ESTATES
3rd ELECTION DISTRICT HOWARD COUNTY, MD
TAX MAP 14, PARCEL 66

LOT 27
2902 WINTERHAZEL COURT
WOODBINE, MD 21797
PLOT PLAN
KHOV ELEVATION



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: 5/27/14

(corner lot)

Permit No.: B14001788

Building Address: 2902 Winterhazel Ct.
 City: WOODBINE State: MD Zip Code: 21797
 Suite/Apt. #: _____ SDP/WP/BA #: F-07-38
 Census Tract: _____ Subdivision: BELLE HAVEN
 Section: _____ Area: _____ Lot: 27
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: vacant lot
 Proposed Use: new S. F. D.
 Estimated Construction Cost: \$ 280,000
 Description of Work: Colorado w/ Morning RM,
6 Ft. FAM. EXT, 2 Story, Full Bsmt,
14 R. 2 FB, 1 HB, & GARAGE (4BR)
 Occupant or Tenant: 1 FP
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: BELLE HAVEN BAKER LLC
 Address: 10751 Falls Rd. Ste. 405
 City: LUTHERVILLE State: MD Zip Code: 21093
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Vicky Meyer
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: 410-296-6900 Fax: _____
 Email: MDBLDGPERRMITS@COMCAST.NET

Contractor Company: K. HOVNANI**AN HOMES
 Contact Person: Chester Willett
 Address: 1802 Brightseat Rd.
 City: Landover State: MD Zip Code: 20785
 License No.: 3149
 Phone: 301-772-8900 Fax: _____
 Email: CWillett@KHOV.COM

Engineer/Architect Company: D. D. C.
 Responsible Design Prof.: Brian Collins
 Address: 192 E. Main St.
 City: Westminster State: MD Zip Code: 21157
 Phone: 410-386-0560 Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	<u>Depth</u>	<u>Width</u>
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input checked="" type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
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<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
	Footings:	
	Roof:	
	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	<u>635000401</u>
Building Shell Permit Number:	

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 Signature: V. Meyer
 Print Name: Vicky Meyer
 Email Address: MDBLDGPERRMITS@COMCAST.NET
 Date: 5/27/2014
 AGENT
 Title/Company: _____

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY

CR# 15575

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>6/18/14</u>	<u>[Signature]</u>

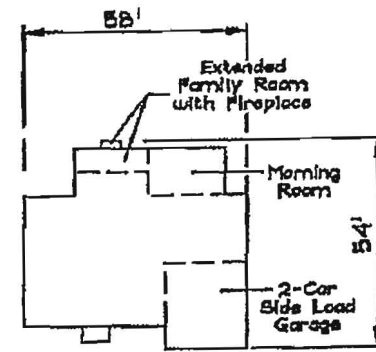
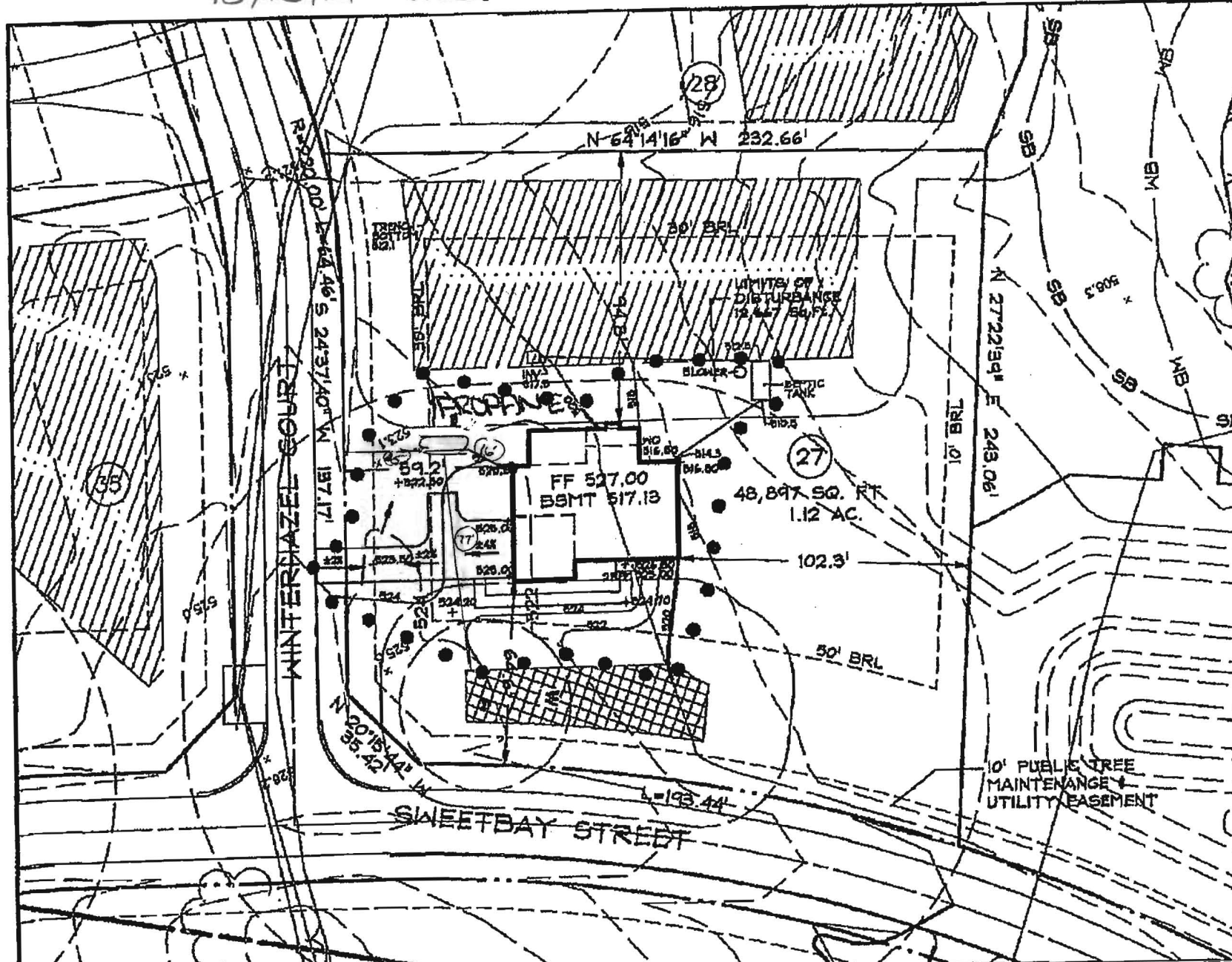
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$ <u>180.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50.00</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>00015575</u>

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

Approved for B14003573 (URT)
10/10/14 - H.O.



COLORADO
TRADITIONAL ELEVATION
BRICK FRONT, WALKOUT
REVERSE UNIT

- GENERAL NOTES**
1. THE EXISTING WELL SHOWN ON THIS PLAN (HO-95-0685) HAS BEEN LOCATED BY DDC, PROFESSIONAL LAND SURVEYOR, AND IS ACCURATELY SHOWN.
 2. BASE SQUARE FOOTAGE OF HOUSE: 3,486 sq.ft.
NUMBER OF BEDROOMS: 4
 3. INFORMATION SHOWN ON THIS PLAN BASED ON PLANS PREPARED BY DMW DATED 6/25/07. EXISTING TOPOGRAPHY BASED ON GRADING PLAN PREPARED BY DEMARIO DESIGN CONSULTANTS DATED 7/9/07 AND FIELD RUN TOPOGRAPHY PREPARED BY DDC INC IN JAN. 2012
 4. PER THE APPROVED ROAD DRAWINGS F-07-38, A DRIVEWAY CULVERT IS NOT REQUIRED.



Planners
Surveyors
Engineers
Landscape Architects
192 East Main Street
Westminster, MD 21157
410.386.0580
410.386.8564 (Fax)
DDC@DDCinc.us
www.DDCinc.us

DDC JOB#:	06116.5
DATE:	5/22/14
SCALE:	1" = 50'
DES. BY:	BKC
DRN. BY:	BKC
CHK. BY:	BKC

BELLE HAVEN ESTATES
3rd ELECTION DISTRICT HOWARD COUNTY, MD
TAX MAP 14, PARCEL 66

LOT 27
2902 WINTERHAZEL COURT
WOODBINE, MD 21797
PLOT PLAN
KHOV ELEVATION

OWNER/BUILDER: K.HOVNANIAN HOMES
1802 Brightseat Road
Landover, Maryland 20785
(301)683-6268

15261 Sweetday St



MID-ATLANTIC AREA

COLORADO

REVISION DATE: 11-21-2013

1CO

2012 INTERNATIONAL RESIDENTIAL CODE

" THE LOCAL JURISDICTION SHALL FILL IN THIS TABLE WITH LOCAL CLIMATIC AND GEOGRAPHIC CRITERIA "

2012 CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA:											
GROUND SNOW LOAD	WIND SPEED (mph)		SEISMIC DESIGN CATAGORY	SUBJECT TO DAMAGE FROM			WINTER DESIGN TEMP.	ICE BARRIER UNDERLAYMENT REQUIRED	FLOOD HAZARDS	AIR FREEZING INDEX	MEAN ANNUAL TEMP
	Speed (mph)	Topographic Effects		Weathering	Frost Line Depth	Termites					
	30		A & B								

ACI

- UNFINISHED BASEMENT
- 4 BEDROOMS
- 1/2 BATH (FIRST FLOOR)
- 3 FULL BATHS (SECOND FLOOR)

Belsham
LOT 27

B14001788

KV_003_3258_COLORADO

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SCALE:
 1/8" = 1'-0" @ 11 x 17
 1/4" = 1'-0" @ 24 x 36

NOTES:
 • W/ OPT. 3RD FLOOR WINDOWS
 REMAIN AT T-0 3/8" HEAD
 HEIGHT BY WINDOW SIZES AS
 SHOWN.
 • SEE ELEVATIONS FOR FOYER
 WINDOW HEAD HEIGHT.

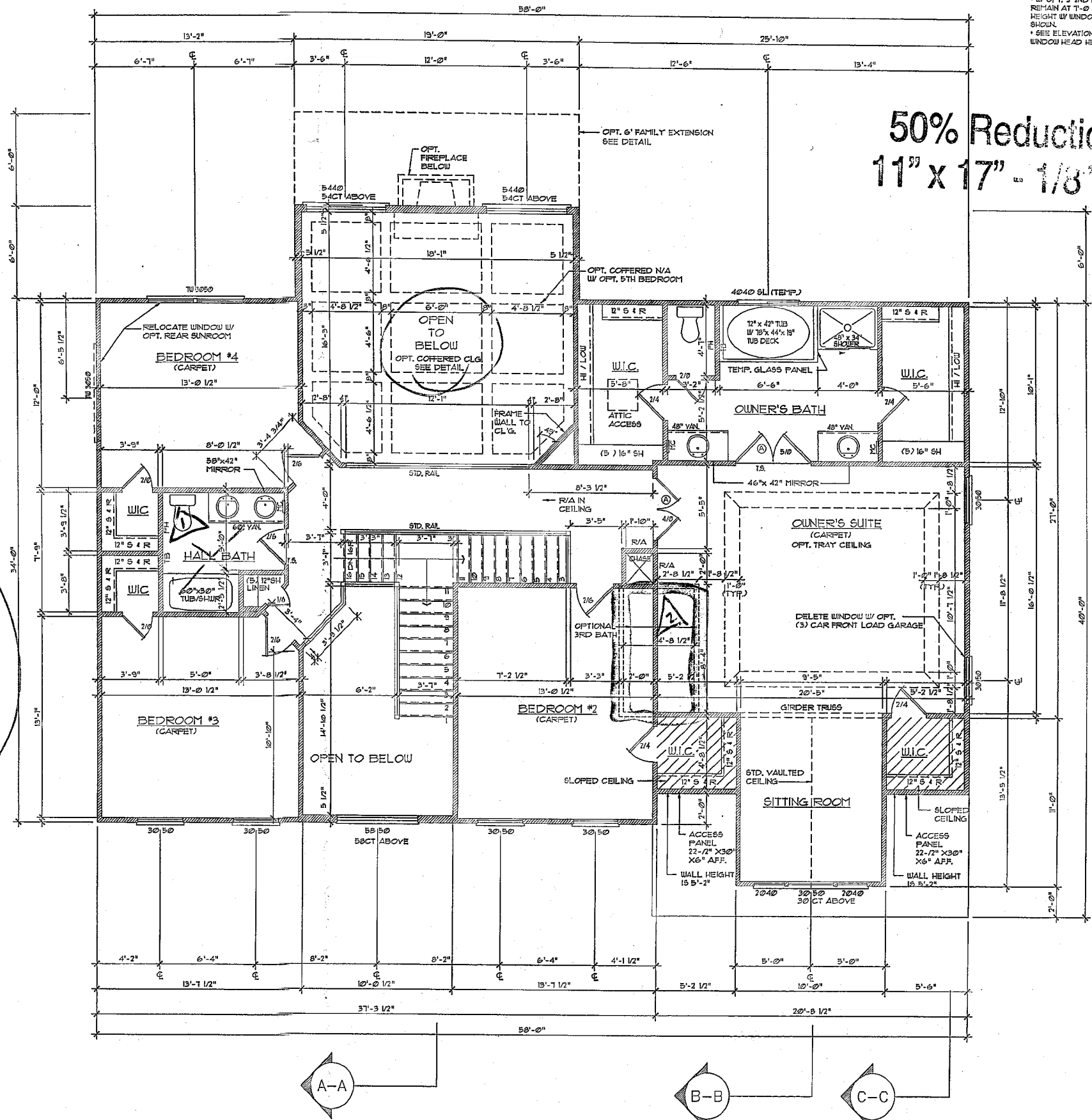
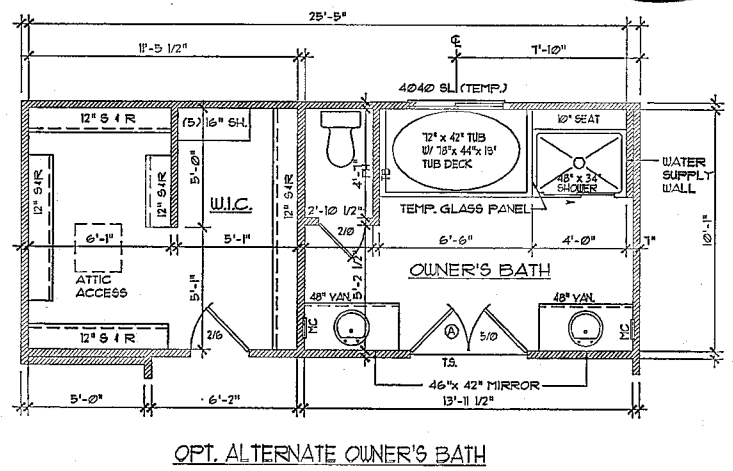
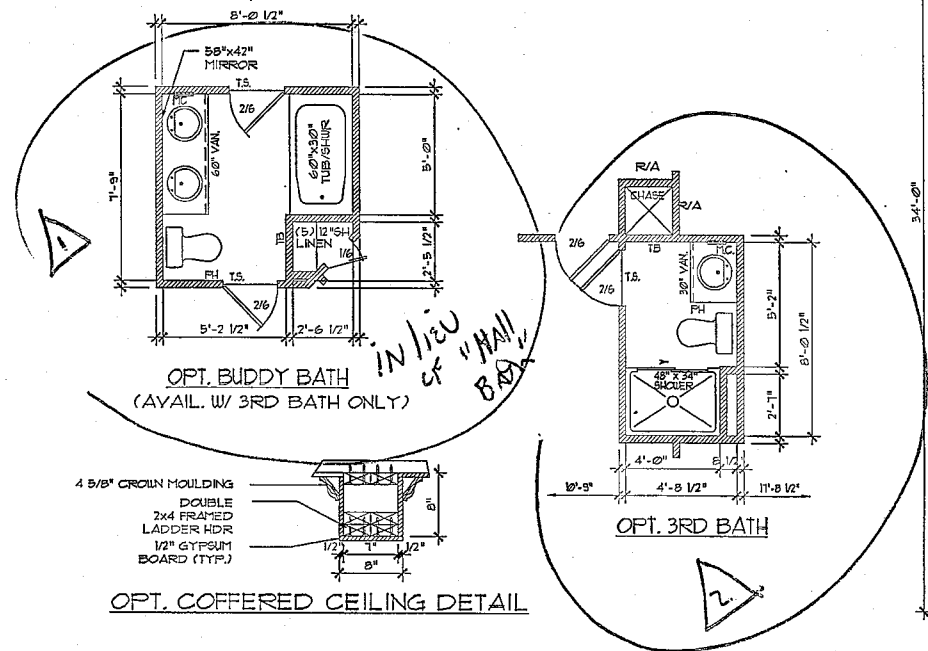
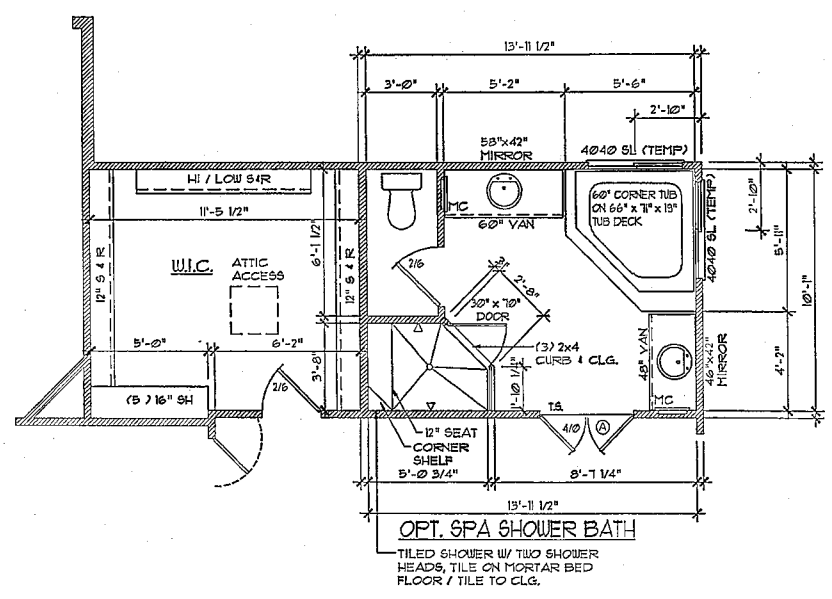
SHEET NUMBER
 5A2

SCALE

DRAWN BY
 ACI

DATE
 02-01-12

50% Reduction
 11" x 17" - 1/8"



A-A

B-B

C-C

SECOND FLOOR PLAN
 TRADITIONAL ELEVATION

COLORADO
 KV_003_5A2

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MODEL COLORADO SET #

Kipmanian
 Corporations

SCALE:
 1/8" = 1'-0" @ 11 x 17
 1/4" = 1'-0" @ 24 X 36

SHEET NUMBER
 6G

SCALE

DRAWN BY
 AC_AJH

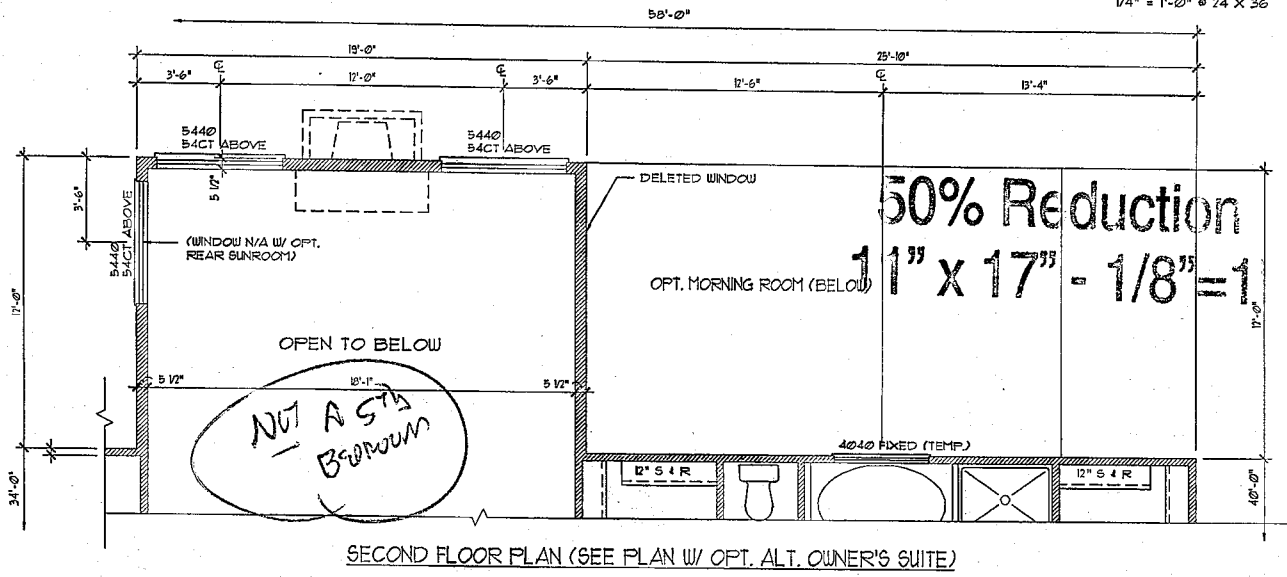
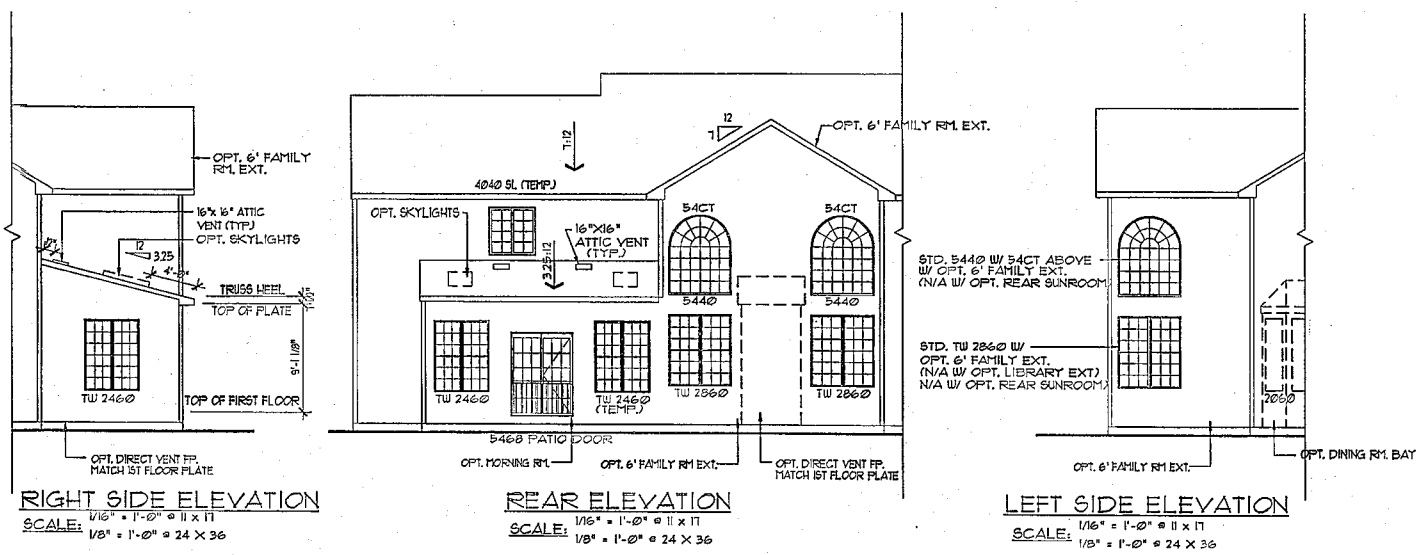
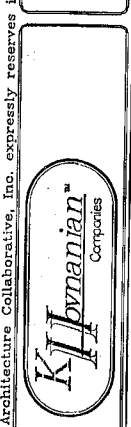
DATE
 5-6-99

REV#	DATE	REMARKS

REV#	DATE	REMARKS

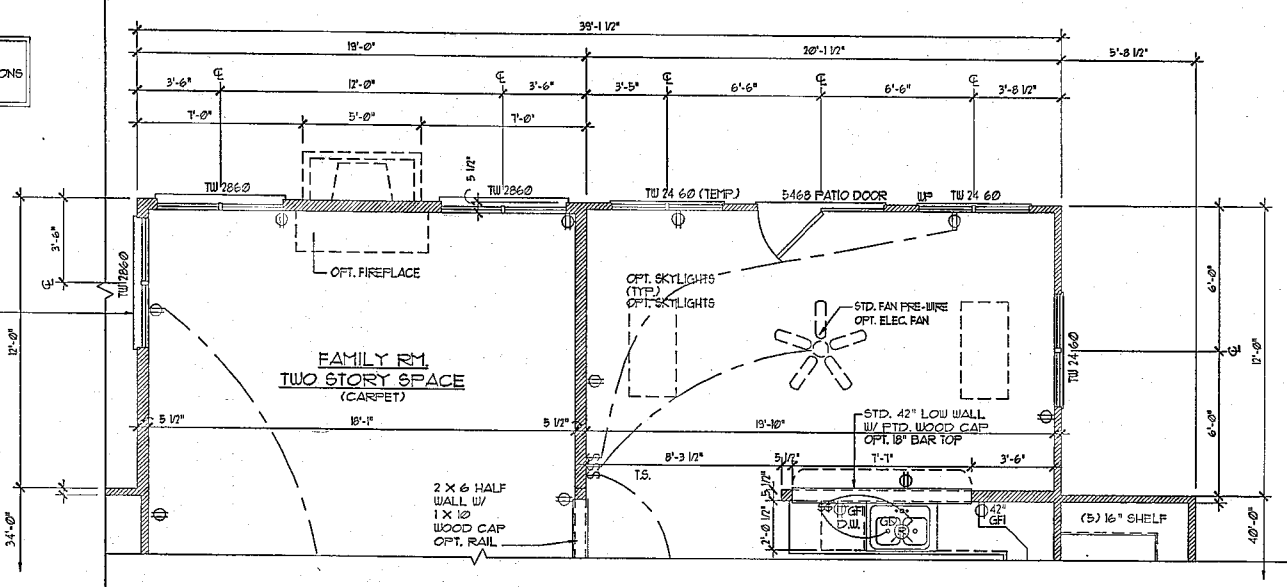
MODEL
 COLORADO
 SET #

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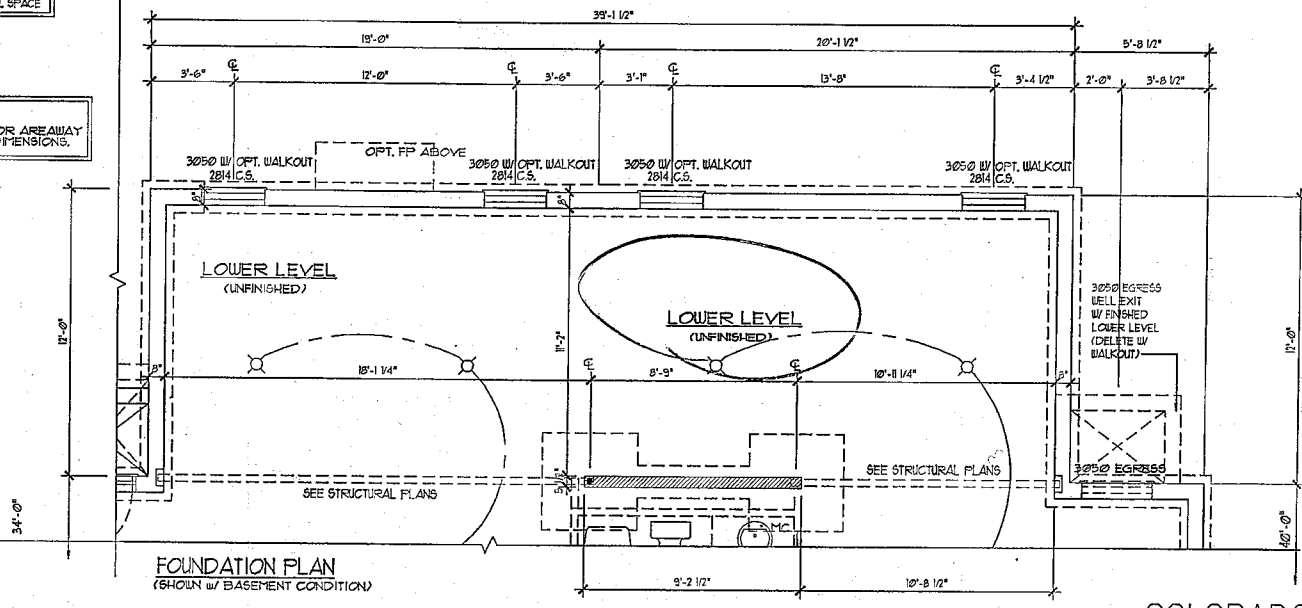
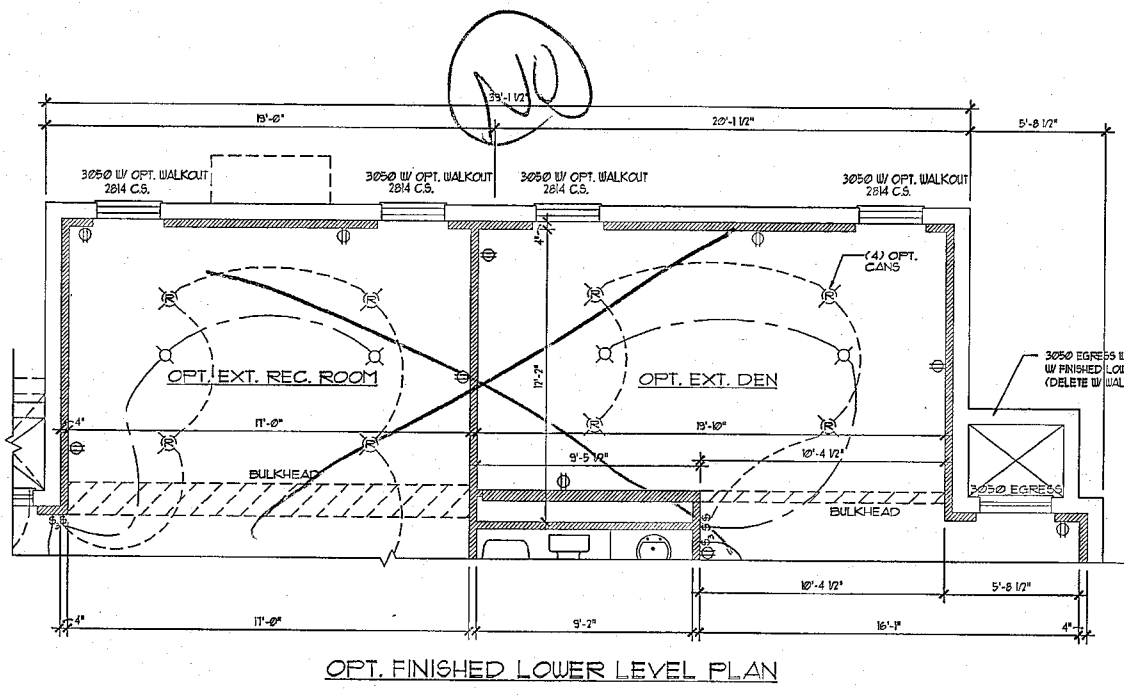
NOTE:
 SEE MANUFACTURER'S SPECIFICATIONS FOR EXACT LAYOUT OF KITCHEN

(WINDOW N/A W/ OPT. LIBRARY EXT OR OPT. REAR SUNROOM)



NOTE:
 WINDOWS, DOORS, AREAWAY & WALKOUT OPTIONS ARE NOT AVAILABLE W/ CRAM SPACE

NOTE:
 SEE PLAN FOR AREAWAY DETAILS & DIMENSIONS.



COLORADO
 OPT. MORNING ROOM & OPT. 6' EXTENDED FAMILY ROOM COMBO SHEET KV_003_6G