

Permits: 410-313-2455
 Inspections: 410-313-1810
 Automated Line: 410-313-3800

Howard County Building/Fire Permit Application
 Department of Inspections, Licenses & Permits
 3430 Court House Drive
 Ellicott City, MD 21043

Permit Number:

212 000 427

Building Address: 15308 Doe Hill Court

Suite/Apt. # _____ SDP/WP/BA #: _____

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: _____

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: _____

Proposed Use: _____

Estimated Construction Cost: \$ 175,000

Description of Work: _____

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: John Anderson

Address: 15308 Doe Hill Ct

City: Howard County State: MD Zip Code: 21117

Home Phone: 410 958 5719 Work Phone: _____

Applicant's Name & Mailing Address, (If other than stated herein): _____

Phone: _____ Fax: _____

Email: _____

Contractor Company: Home Owner

Contact Person: _____

Address: _____

City: _____ State: _____ Zip Code: _____

License No. : _____

Phone: _____ Fax: _____

Email: _____

Engineer/Architect Company: _____

Responsible Design Prof.: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input checked="" type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	Roadside Tree Project Permit #
<input type="checkbox"/> Manufactured Home	

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 _____

Email Address _____

Date 2/14/12

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		
Fire Protection		

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	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

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

Building Address <u>15308 DCE HILL CRT</u> <u>WOODBINE MD 21797</u>	Property Owner's Name <u>BEUL & KAREN VOLLEY</u> Address <u>15308 DCE HILL COURT</u> City <u>WOODBINE</u> State <u>MD</u> Zip Code <u>21797</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>6070</u> Subdivision <u>Wellington West</u> Section <u>8</u> Area <u>3</u> Lot <u>31</u> Tax Map <u>11</u> Parcel <u>69</u> Grid <u>20</u> Zoning <u>IL1D</u> Map Coordinates <u>BK5</u> Lot size _____	Home Phone <u>(410)442-3742</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): <u>STEVE POWERS</u> <u>7 HAVILMARK CRT</u> <u>BALTIMORE MD 21236</u> Phone <u>(410)521-6228</u> Fax _____

Existing Use <u>SFD</u> Proposed Use <u>SFD WIDECK</u> Estimated Construction Cost \$ <u>30,000.-</u> Description of Work <u>SCREEN PORCH 16</u> <u>X12 1 31' X 9' DECK W/STEPS</u> <u>TO GRADE</u>	Contractor Company <u>KING FENCE CO</u> Contact Person <u>STEVE POWERS</u> Address <u>1114 727 3 NORTH</u> City <u>CROFTON</u> State <u>MD</u> Zip Code <u>21114</u> License No. <u>7E15-01</u> Phone _____ Fax _____
--	--

Occupant or Tenant <u>OWNER</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
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BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Utilities Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____	Building Characteristics SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: <u>172</u> Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Utilities Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____

THE TIME AND ENERGY EXPENSES AND RISKS ASSOCIATED WITH THE REVIEW OF THIS APPLICATION, (2) THAT THE REVIEWER WILL COMPLETELY WITH ALL RESPONSIBILITIES HOWARD COUNTY SUBJECTS ARE APPROPRIATE TO REVIEW, (3) THAT THE REVIEWER WILL BE RESPONSIBLE FOR THE REVIEWER'S OWNERSHIP OF THE PROPERTY DESCRIBED IN THIS APPLICATION, (4) THAT THE REVIEWER'S COMPANY OR INDIVIDUALS THE REVIEWER HAS ASSIGNED THIS PROPERTY FOR THE PURPOSE OF PERFORMING THE WORK PERMITTED AND KINDS OF SERVICES.

Applicant's Signature <u>[Signature]</u> Title/Company _____	Date _____ Print Name <u>R. STEVEN POWERS</u>
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Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 ** PLEASE WRITE NEATLY AND LEGIBLY **

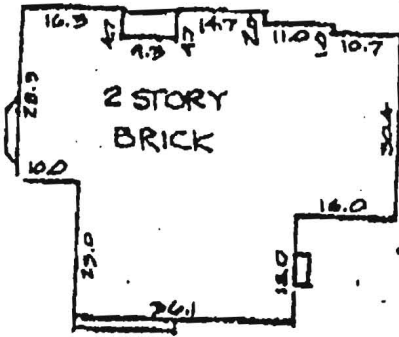
FOR OFFICE USE ONLY			
AGENCY	DATE	SIGNATURE APPROVAL	PROPERTY ID#
Land Development DPZ			45-2165
State Highways			
Building Official	2/2/02	[Signature]	
Dev. Engineering DPZ			
Health	2/2/02	[Signature]	
Fire Protection			
Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			
ONE STOP SHOP <input type="checkbox"/>			
DPZ SETBACK INFORMATION: Front: _____ Rear: _____ Side: _____ Side St: _____ All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> Lot Coverage for New Town Zone _____ SDP/Red-line approval date _____ Accepted by _____			
Filing fee \$ _____ Permit fee \$ _____ Excise fee \$ _____ Add'l per. fee \$ _____ TOTAL FEES \$ _____ Sub-total paid \$ _____ Balance due \$ _____ Check # _____ Validation # _____			
Distribution of Copies: White: Building Official; Green: LDD, DPZ; Yellow: DED, DPZ; Pink: Health; Gold: SHA			

UN. -28' 00 (WED) 15:42 PULTE HOME CORP.

TEL: 4106442643

P. 001

THIS LOCATION DRAWING IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY, OR ITS AGENTS, IN CONNECTION WITH FINANCING THE PROPERTY SHOWN HEREON. THIS DRAWING IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OF PROPERTY LINES OR THE CONSTRUCTION OF IMPROVEMENTS SUCH AS FENCES, GARAGES, OR BUILDING ADDITIONS. THIS DRAWING SHOWS THE CONFIGURATION AS CURRENTLY RECORDED, BEING SUFFICIENT FOR SETTLEMENT PURPOSES, BUT BEING INSUFFICIENT FOR THE SETTING OF PROPERTY CORNER PINS ON THE GROUND.



FOUNDATION DETAIL

SCALE: 1" = 30'

3/7/01

ML

PROPOSED DECK

OK, LEAVES

7-10' TO EX.

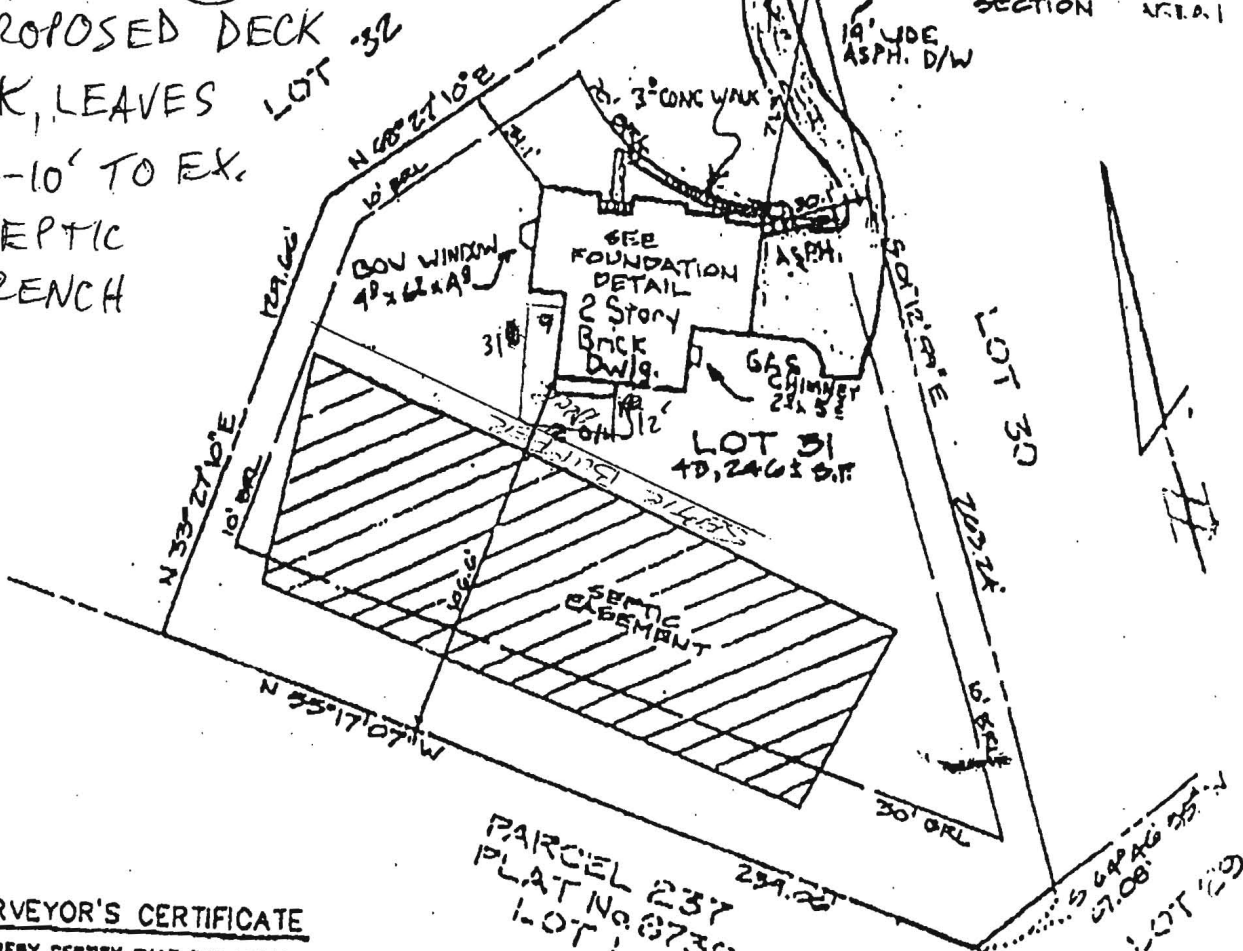
SEPTIC

TRENCH

6' PUBLIC DITCH BASEMENT
10' TREE MAINTENANCE BASEMENT

DOE
H. H. H. I
K. H. H. H.
K. H. H. H.

24' PRIVATE USE - 14' COMM. INCREASES, EXCEEDS BASEMENT FOR LOTS 30 THRU 3 AND LOT 17 9 IL WELLINGTON WEST SECTION AREA 1



PARCEL 237
PLAT No. 0738
LOT 1

SURVEYOR'S CERTIFICATE

HEREBY CERTIFY THAT THE LOCATION DRAWING SHOWN HEREON IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF; THAT THE IMPROVEMENTS HAVE BEEN LOCATED AS THE RESULT OF A FIELD SURVEY, AND THAT THERE ARE NO VISIBLE ENCROACHMENTS UNLESS SHOWN. THE PROPERTY DOES NOT LIE WITHIN A FLOOD HAZARD AREA ON THE FEMA F.I.R.M. IDENTIFIED BELOW, AT THE

MAIL To Contractor *H C*

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
 3430 COURT HOUSE DRIVE
 ELlicOTT CITY, MD 21043
 PERMITS (410)313-2455 INSPECTIONS (410)313-1810
 AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
 P00022424

Building Address 15308 Doe Hill Ct
Woodbine, MD. 21797

Suite/Apt. #: _____ SDP/W/P/Petition #: _____

Census Tract 6040 Subdivision Wollington West

Section 2 Area 2 Lot 31

Tax Map 14 Parcel 69 Grid 20

Zoning PC-DED Map Coordinates 9A5 Lot size _____

Property Owner's Name Rolle Home Corporation

Address 1501 S. Edgewood Street Suite K

City Baltimore State MD Zip Code 21227

Home Phone _____ Work Phone 410 644 5603

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone _____ Fax 410 644 2643

Existing Use Single Family Dwelling

Proposed Use 1,000 Gallon U.G. Propane Tank

Estimated Construction Cost \$ 2800.00

Description of Work Buy a 1,000 Gallon Underground
Propane Tank

Contractor Company Suburban Propane

Contact Person Michael DeVincent

Address 31 Derwood Circle P.O. Box 1766

City Rockville State MD Zip Code 20849

License No. _____

Phone 301.251.0606 Fax 301.251.0608

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
No. of Bedrooms: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Other: _____
Other Structure: Dimensions: _____ Footings: _____ Roof: _____	
State Certified Modular Manufactured Home	

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 DESCRIBED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS HOWARD COUNTY OFFICIALS THE RIGHT TO ENTER ANY TIME NECESSARY FOR THE PURPOSES OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Michael A. DeVincent
 Applicant's Signature
Residential Energy Rep
 Title/Company

Michael A. DeVincent
 Print Name
2/13/00
 Date

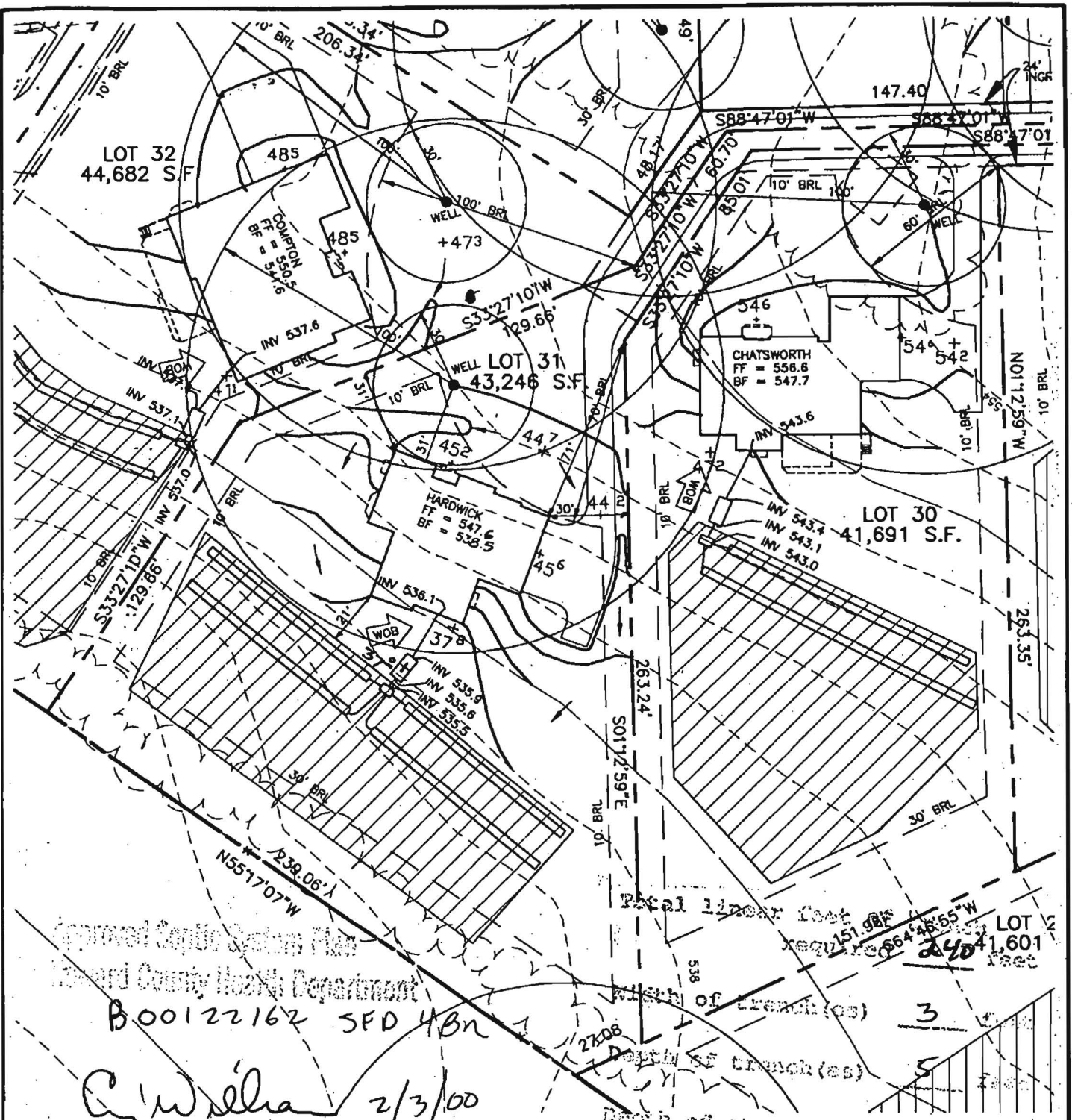
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY **
 FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ	<u>2/23/00</u>	<i>Mark Giff</i>
Health		
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

HOWARD COUNTY HEALTH DEPARTMENT
 ENVIRONMENTAL HEALTH
 2000 FEB 17 AM 11:21
 RECEIVED

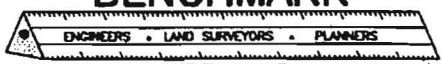
DPZ SETBACK INFORMATION	PROPERTY ID: <u>440765</u>
Front: _____	Filing fee \$ <u>1100</u>
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Sub-total paid \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for New Town Zone	Check: <u>0.00</u>
SDP/Red-line approval date: _____	Validation \$ _____
Accepted by: <i>[Signature]</i>	

Distribution of Copies: _____
 Green: LDD, DPZ _____
 Yellow: DED, DPZ _____
 Pink: Health _____
 Gold: SHA _____



FIRST FLOOR ELEVATION = 547.6
 FOYER ELEVATION = NA
 BASEMENT ELEVATION = 538.5
 SPOT ELEVATION AT GARAGE = 545.6

BENCHMARK



ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELLICOTT CITY, MD 21043
 PHONE: 410-465-6105 FAX: 410-465-6644

Total Linear Foot required = 151.98
 Width of trench (as) 3
 Depth of trench (as) 5
 Depth of stone required below distribution pipe 2 feet

WELLINGTON WEST SECTION 2
LOT 31
 4th ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' DATE: 11/03/99

YEHIA HASSANEIN RESIDENCE

15308 DOE HILL CT
 WOODBINE, MD 21797
 HOWARD COUNTY

PROJECT TEAM

ARCHITECT
 SUSTAINABLE DESIGN GROUP
 22923 WILDCAT RD
 GAITHERSBURG, MD 20882
 PH: 301-428-1040
 FAX: (301) 916-8786

CONTACT: JOHN SPEARS
 EMAIL: jspears@sustainabledesign.com

STRUCTURAL ENGINEER
 STRUCTURAL ENGINEERING UNLIMITED, LLC
 3280 URBANA PIKE, SUITE 101
 JAMSVILLE, MD 21754
 PH: 410-442-4400

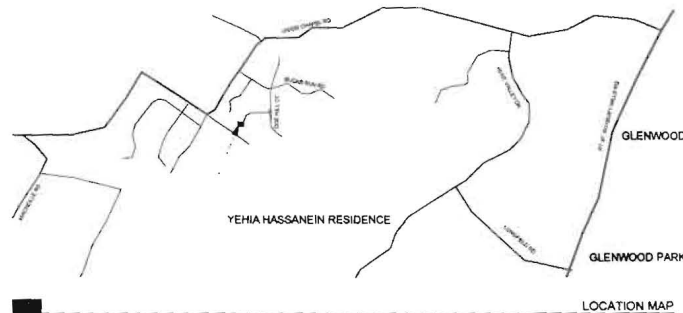
SHEET INDEX	
ID	Name
CS	COVER SHEET
D-101	DEMO
A-101	GROUND FLOOR PLAN, NEW WORK
A-102	FIRST FLOOR PLAN, NEW WORK
A-103	SECOND FLOOR PLAN, NEW WORK
A-104	ROOF PLAN
A-201	NORTH ELEVATION, NEW WORK
A-202	SOUTH ELEVATION, NEW WORK
A-203	EAST ELEVATION, NEW WORK
A-204	WEST ELEVATION, NEW WORK
A-301	EAST WEST SECTION
A-302	NORTH SOUTH SECTION A
A-303	NORTH SOUTH SECTION B
A-304	SECTION DETAILS
A-401	BASEMENT ELECTRICAL PLAN
A-402	FIRST FLOOR ELECTRICAL PLAN
A-403	SECOND FLOOR ELECTRICAL PLAN
S-101	FOUNDATION PLAN
S-102	FIRST FLOOR FRAMING PLAN
S-103	SECOND FLOOR FRAMING PLAN
S-104	ROOF FRAMING PLAN
WB-101	WALL BRACING
M-101	MECHANICAL

CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA

Ground snowload - 30 psf
 Design Windspeed - 90 mph, 3 second gust
 Wind Exposure Category - D
 Seismic Design Category - D
 First Floor - 50 psf
 Second Floor (Sleeping areas) - 40 psf
 Roof - 40 psf
 Terminate decay - Moderate
 Frost Footings - 30" min. depth
 Soil bearing capacity - 2,000 psf

SITE DATA

Map: 0014
 Grid: 0008
 Parcel: 0069
 Subdivision: 0000
 Loc: 31
 Plat No: 11637
 Land Soft Envelopes Area: 43246 sq ft
 40475 sq ft
 Year Built: 2000
 Zoning: RC-DBO



SQUARE FOOTAGE

	EXISTING	PROPOSED	TOTAL
GROUND FLOOR (BASEMENT)	1696 SQ.FT	716 SQ.FT	2412 SQ.FT.
FIRST FLOOR	2462 SQ.FT	539 SQ.FT	3001 SQ.FT.
SECOND FLOOR	1711 SQ.FT	1344 SQ.FT	3055 SQ.FT
GARAGE	525 SQ.FT	792 SQ.FT	1317 SQ.FT
UNCONDITIONED STORAGE	0 SQ.FT	200 SQ.FT	200 SQ.FT
TOTAL	6394 SQ.FT	3591 SQ.FT	9985 SQ.FT

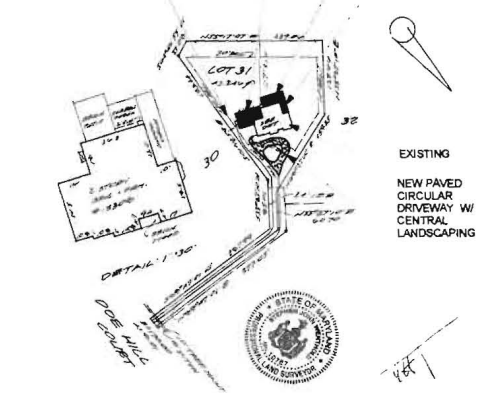
# of Bathrooms	5	3	8
# of Bedrooms	4	3	7

NEW 3-STORY ADDITION:
 UNCONDITIONED STORAGE, KITCHEN ADDITION,
 AND MASTER WALK-IN CLOSET

NEW GAME ROOMS:
 ENCLOSE BELOW EXISTING SUNROOM

NEW 2-STORY ADDITION:
 GARAGE, LIBRARY,
 3 BEDROOMS, 3 BATHROOMS

10' SIDE SETBACK



No division of property unless so shown. Applicant certifies to owner.

Date: 10-01-08 Scale: AS SHOWN

Plat Book: 15837 NO TITLE REPORT FURNISHED

Work Order: 06-0018

Address: 15308 DOE HILL COURT, WEST

Division: 4

Jurisdiction: HOWARD COUNTY, MD

LOCATION DRAWING
 LOT 31
 WELINGTON WEST
 SECTION 2, AREA TWO

Surveyor's Certification
 I hereby certify that the survey shown herein is correct to the best of my knowledge and that original plat information is in my possession unless otherwise indicated. This survey is not a boundary survey and the location of existing or proposed structures is not guaranteed. Any lines of property are approximate in location. This property does not include a 100 year flood zone according to FEMA. Inquiries should be referred to the appropriate agency for more information. Building, easement lines shown are as per available information and are subject to the interpretation of the engineer.

NOTE: This plat is of benefit to a contractor only insofar as it is required by a contract. It is the responsibility of the contractor to verify the location of all structures and easements on the ground. The contractor is responsible for the establishment of location of tanks, gauges, valves, etc. on other existing utility lines. The contractor is responsible for the location of all structures and easements on the ground. The contractor is responsible for the establishment of location of tanks, gauges, valves, etc. on other existing utility lines. The contractor is responsible for the location of all structures and easements on the ground. The contractor is responsible for the establishment of location of tanks, gauges, valves, etc. on other existing utility lines.

15308 DOE HILL COURT, WEST

111 Russell Avenue
 Suite 303
 Gaithersburg, MD 20878
 (301) 771-3400

1 YEHIA HASSANEIN RESIDENCE PLAT PLAN W/ ADDITIONS 1" = 100'

SUSTAINABLE DESIGN GROUP

22923 WILDCAT RD
 GAITHERSBURG, MD
 20882

301 428 1040

CONSULTANTS
 STRUCTURAL ENGINEERING UNLIMITED, LLC

3280 URBANA PIKE, SUITE 101
 JAMSVILLE, MD 21754
 PH: 410-442-4400

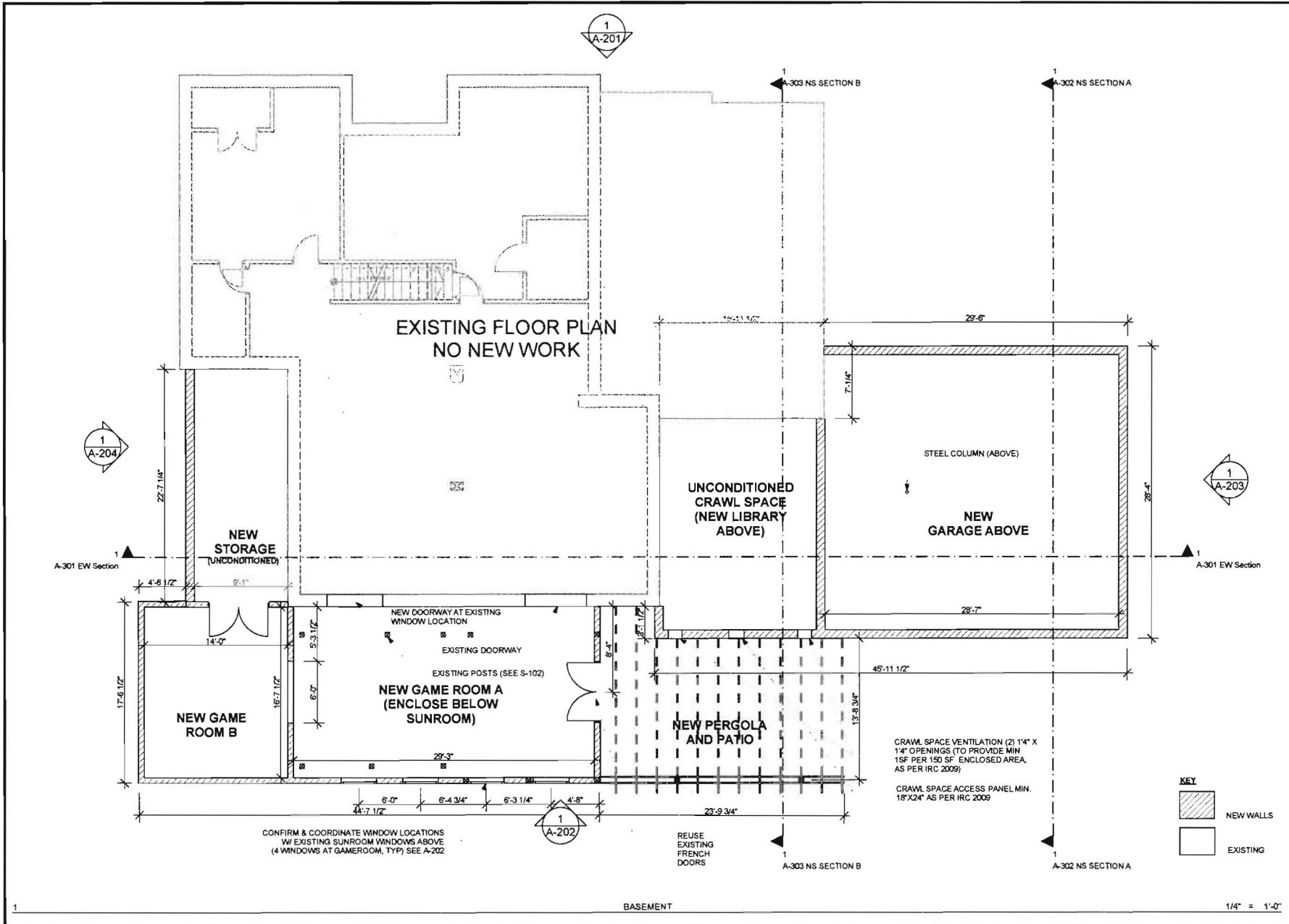
YEHIA HASSANEIN RESIDENCE
 15308 DOE HILL CT
 WOODBINE, MD 21797

MARK	DATE	DESCRIPTION
	1/24/12	REVISIONS
	1/23/11	HOA REVS
	11/16/11	N ELEV REV
	11/2/11	STRUCT REVS
	10/14/11	PERMIT
	9/29/11	PRELIM REVS
	9/27/11	PRELIM STRUCT
	9/14/11	PRELIMINARY

PROJECT NO:
 MODEL FILE:
 CHK'D BY: JOHN SPEARS
 DRAWN BY: AUDRA HARLEMAN
 COPYRIGHT

SHEET TITLE
 COVER SHEET

CS



SUSTAINABLE DESIGN GROUP

22923 WILDCAT RD
GAITHERSBURG, MD
20882

301 428 1040

CONSULTANTS

STRUCTURAL ENGINEERING UNLIMITED, LLC

3280 URBANA PIKE, SUITE 101
HANSMVILLE, MD 21784
PH: 410-443-4400

N

YEHIA HASSANEIN RESIDENCE
15308 DOE HILL CT
WOODBINE, MD 21797

MARK	DATE	DESCRIPTION
1/24/12		REVISIONS
1/22/11		HCA REVS
1/19/11		N ELEV REV
1/18/11		STRUCT REVS
1/14/11		PERMIT
9/29/11		PRELIM REVS
9/27/11		PRELIM STRUCT
9/14/11		PRELIMINARY

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GROUND FLOOR PLAN: NEW WORK

A-101



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LAWRENCEVILLE, MD 21784
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YEHIA
HASSANEIN
RESIDENCE
15308 DOE HILL CT
WOODBINE, MD 21797



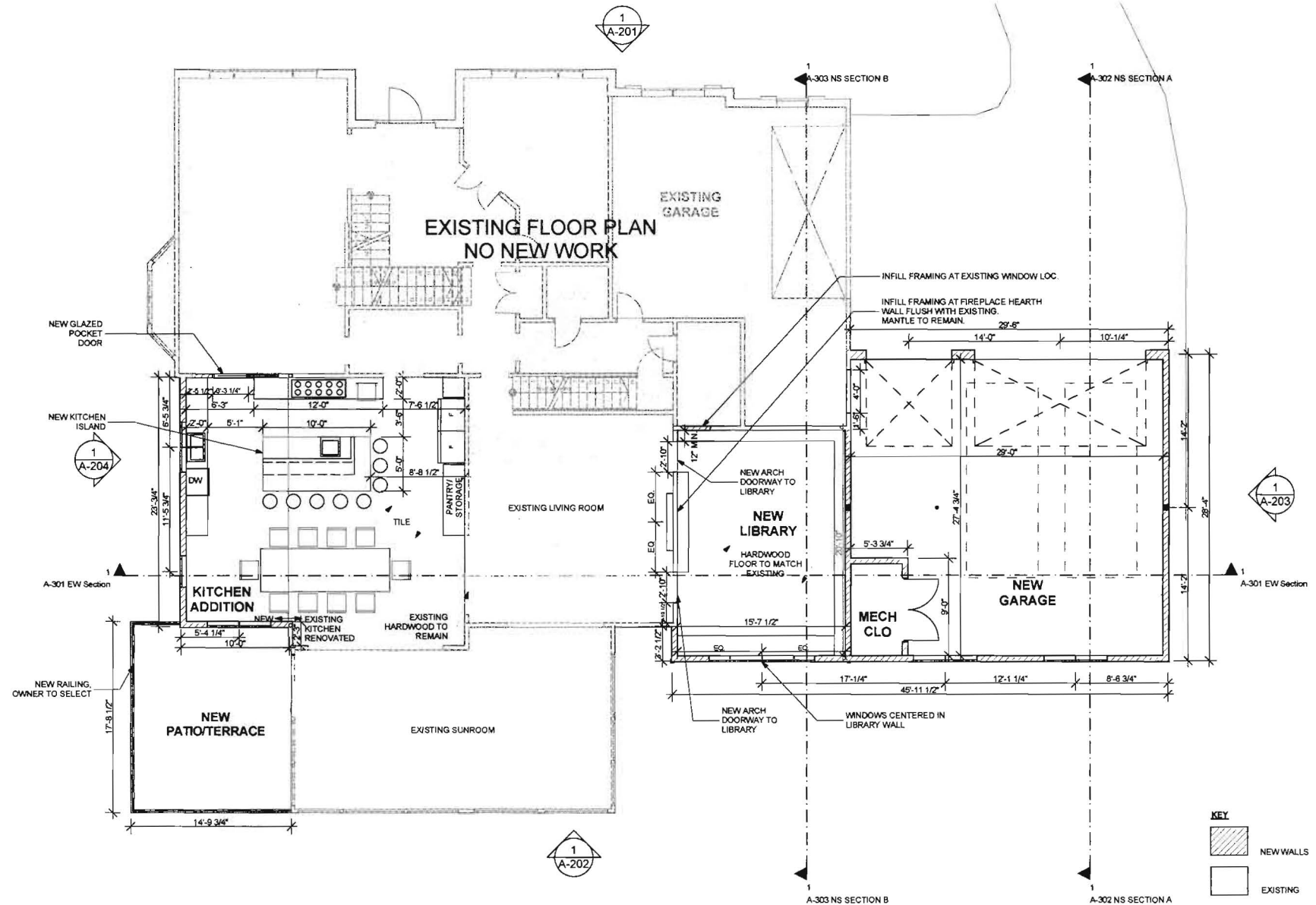
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	1/23/11	HOA REVS
	1/18/11	N ELEV REV
	1/9/11	STRUCT REVS
	10/14/11	PERMIT
	9/29/11	PRELIM REVS
	9/27/11	PRELIM STRUCT
	9/14/11	PRELIMINARY

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SHEET TITLE
FIRST FLOOR
PLAN: NEW WORK

A-102

EXISTING FLOOR PLAN
NO NEW WORK



1st FLOOR

1/4" = 1'-0"

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**YEHIA
HASSANEIN
RESIDENCE**
15308 DOE HILL CT
WOODBINE, MD 21797

MARK	DATE	DESCRIPTION
1/24/12		REVISIONS
11/23/11		HOA REVS
11/16/11		N ELEV REV
11/9/11		STRUCT REVS
10/7/11		PERMIT
9/29/11		PRELIM REVS
9/27/11		PRELIM STRUCT
-	9/14/11	PRELIMINARY

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MODEL FILE:

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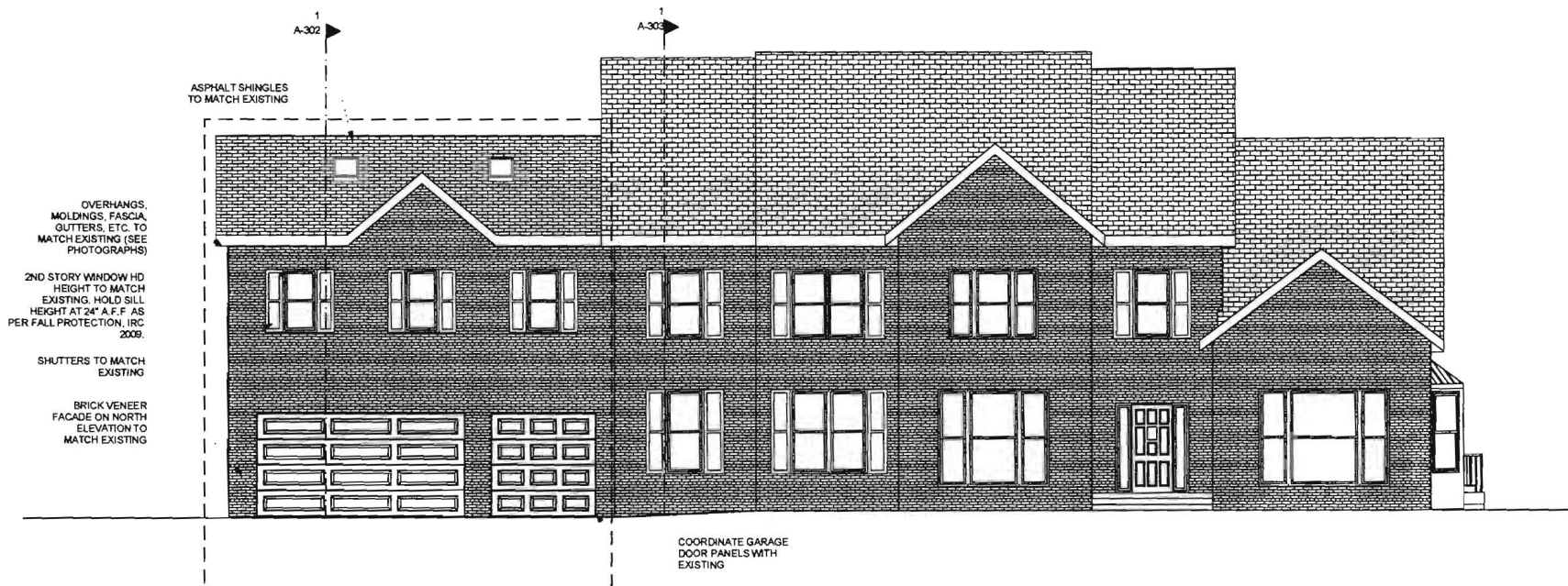
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**NORTH
ELEVATION: NEW
WORK**

A-201



**NEW WORK: 2-STORY ADDITION:
GARAGE, LIBRARY,
3 BEDROOMS, 3 BATHROOMS**

NORTH ELEVATION

1/4" = 1'-0"

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PH: 410-443-4400

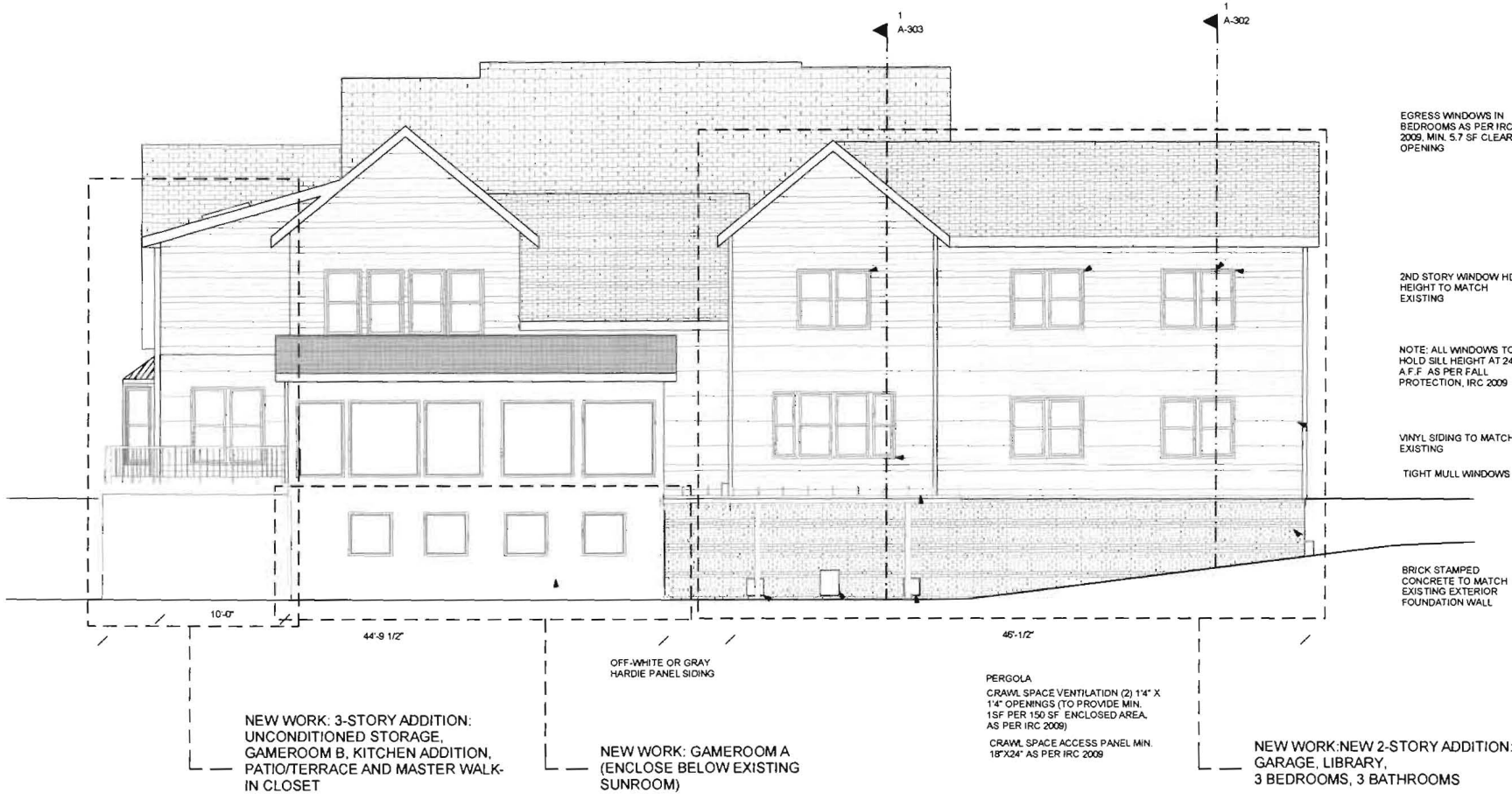
**YEHIA
HASSANEIN
RESIDENCE**
15308 DOE HILL CT
WOODBINE, MD 21797

MARK	DATE	DESCRIPTION
	1/24/12	REVISIONS
	1/23/11	HCA REVS
	11/10/11	N ELEV REV
	11/10/11	STRUCT REVS
	10/14/11	PERMIT
	9/29/11	PRELIM REVS
	9/27/11	PRELIM STRUCT
	8/14/11	PRELIMINARY

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SHEET TITLE
SOUTH
ELEVATION: NEW
WORK

A-202



SOUTH ELEVATION

1/4" = 1'-0"

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PH: 410-442-4400

**YEHIA
HASSANEIN
RESIDENCE**
15308 DOE HILL CT
WOODBINE, MD 21797

MARK	DATE	DESCRIPTION
	1/24/12	REVISIONS
	11/23/11	HOA REVS
	11/16/11	N ELEV REV
	11/9/11	STRUCT REVS
	10/14/11	PERMIT
	9/29/11	PRELIM REVS
	9/27/11	PRELIM STRUCT
	-	9/14/11 PRELIMINARY

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SHEET TITLE
EAST ELEVATION:
NEW WORK

A-203

2ND STORY WINDOW HD
HEIGHT TO MATCH
EXISTING.

NOTE: ALL WINDOWS TO
HOLD SILL HEIGHT AT 24"
A.F.F. AS PER FALL
PROTECTION, IRC 2009

EGRESS WINDOW IN
EXISTING BEDROOM AS
PER IRC 2009, MIN. 5.7 SF
CLEAR OPENING

OVERHANGS, MOLDINGS,
FASCIA, GUTTERS, ETC. TO
MATCH EXISTING
(SEE PHOTOGRAPHS)

VINYL SIDING TO MATCH
EXISTING

PERGOLA

(DASHED: GAMEROOM
BEYOND)

NEW WORK: GAMEROOM A (ENCLOSE BELOW
EXISTING SUNROOM)

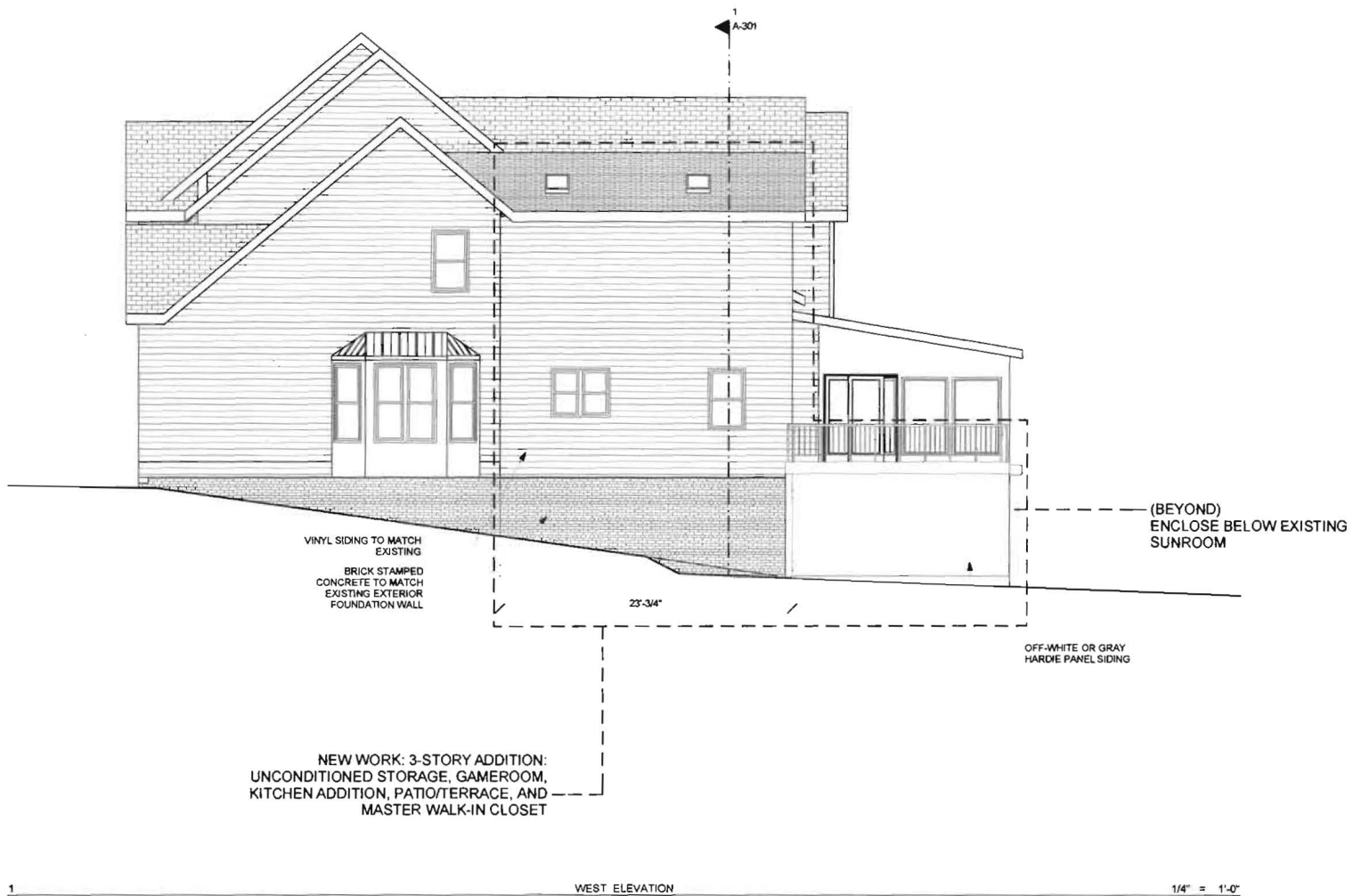
NEW WORK: 2-STORY ADDITION:
GARAGE, LIBRARY,
3 BEDROOMS, 3 BATHROOMS

BRICK STAMPED
CONCRETE TO MATCH
EXISTING EXTERIOR
FOUNDATION WALL

28'-9 1/2"

EAST ELEVATION

1/4" = 1'-0"



SUSTAINABLE DESIGN GROUP

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JANESVILLE, MD 21784
PH: 410-442-4400

YEHIA HASSANEIN RESIDENCE
15308 DOE HILL CT
WOODBINE, MD 21797

MARK	DATE	DESCRIPTION
	1/24/12	REVISIONS
	11/23/11	HOA REVS
	7/18/11	N ELEV REV
	11/27/11	STRUCT REVS
	10/18/11	PERMIT
	9/29/11	PRELIM REVS
	9/27/11	PRELIM STRUCT
	9/14/11	PRELIMINARY

PROJECT NO:

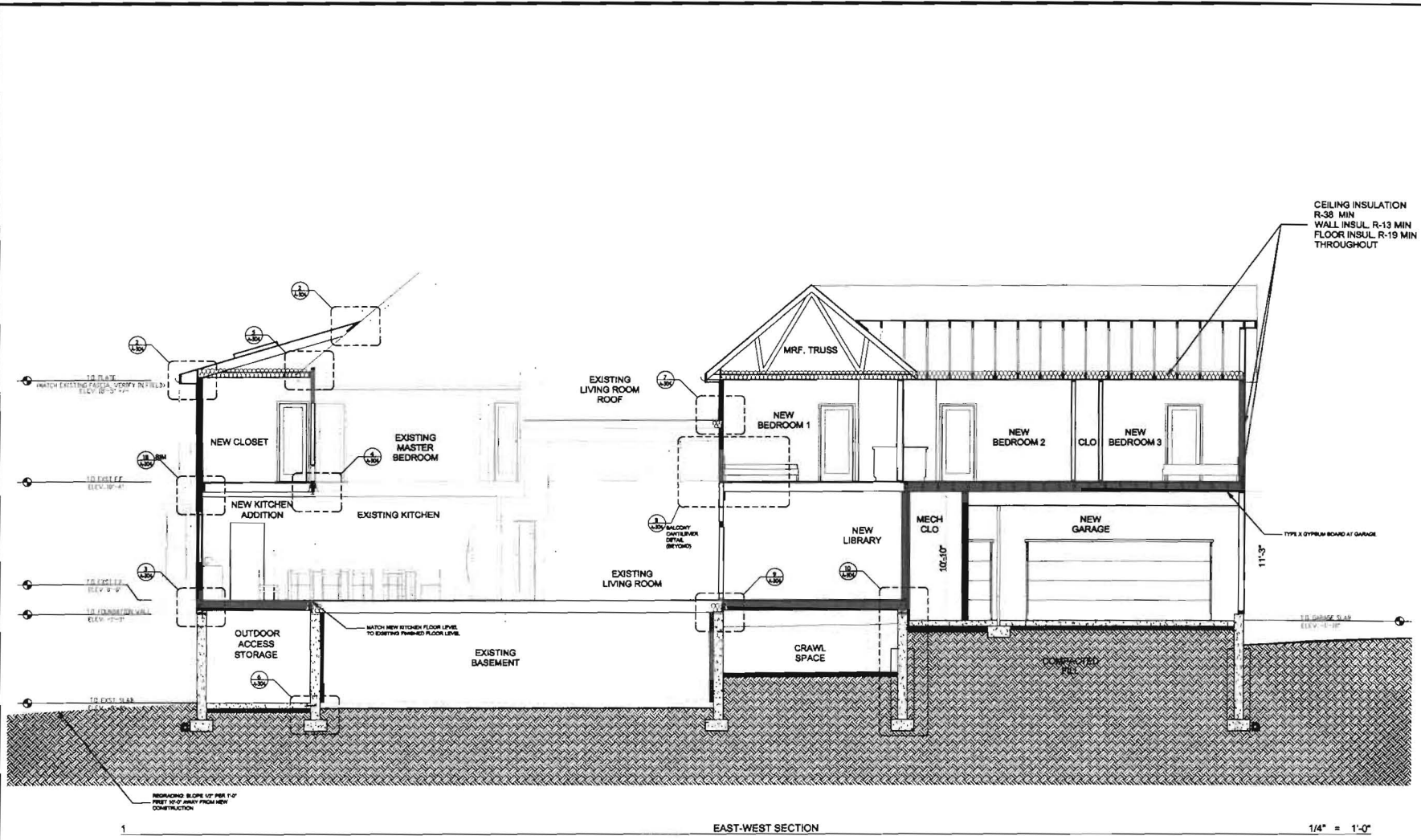
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SHEET TITLE

WEST ELEVATION:
NEW WORK

A-204



EAST-WEST SECTION

1/4" = 1'-0"

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CONSULTANTS
STRUCTURAL ENGINEERING UNLIMITED, LLC
9322 HILLSBOROUGH DR
FREDERICK, MD 21701
301-668-9999

YEHLIA HASSANEIN RESIDENCE
15308 DOB HILL CT
WOODBINE, MD 21797

MARK	DATE	DESCRIPTION
	1/24/12	REVISIONS
	11/23/11	HOA REVS
	11/9/11	STRUCT REVS
	10/14/11	PERMIT
	9/29/11	PRELIM REVS
	9/27/11	PRELIM STRUCT
	9/14/11	PRELIMINARY

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SHEET TITLE
EAST-WEST SECTION

A-301

**SUSTAINABLE
DESIGN GROUP**

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GAITHERSBURG, MD
20882

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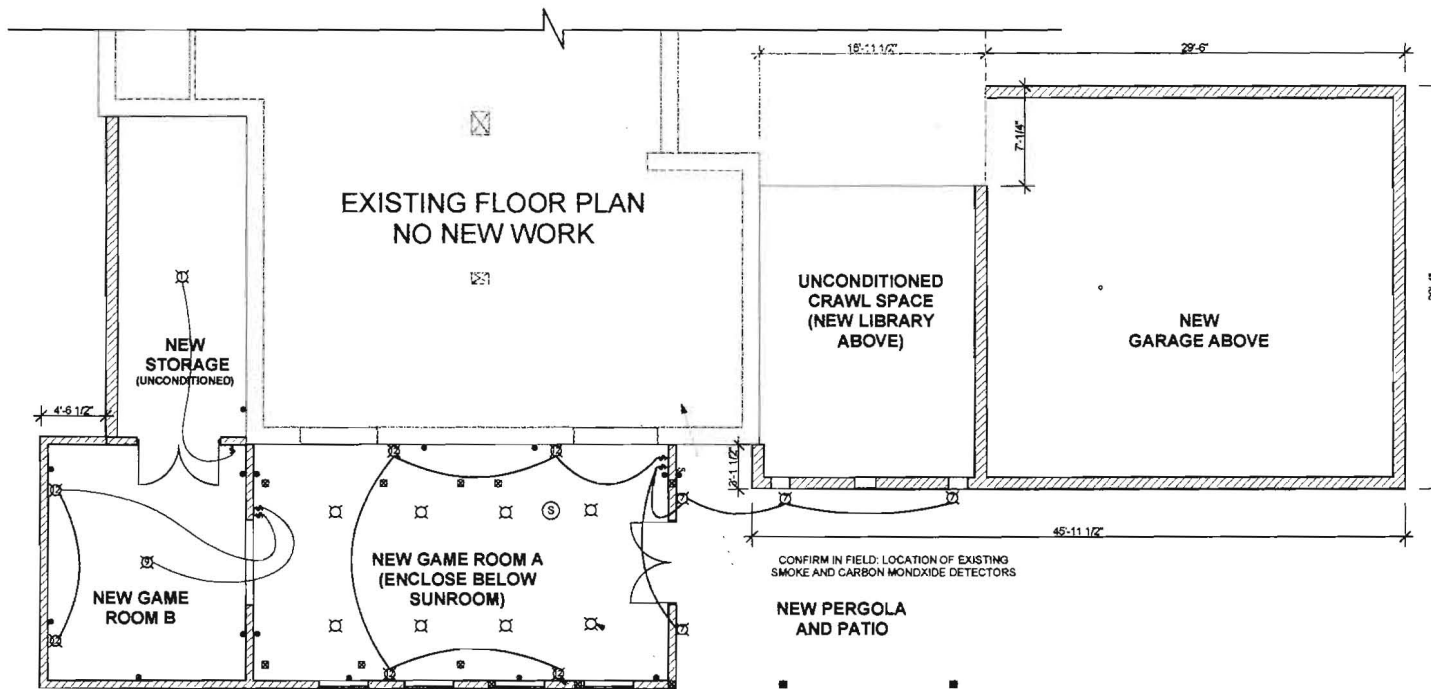
CONSULTANTS

**STRUCTURAL
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UNLIMITED, LLC**

3380 URBANA PIKE, SUITE 101
JAMESVILLE, MD 21754
PH: 410-443-4400



**YEHIA
HASSANEIN
RESIDENCE**
15308 DOE HILL CT
WOODBINE, MD 21797



CONFIRM IN FIELD: LOCATION OF EXISTING
SMOKE AND CARBON MONOXIDE DETECTORS

**NEW PERGOLA
AND PATIO**

EXISTING RECESSED LIGHTING TO REMAIN (TYP)
OWNER TO CONFIRM LOCATION & NUMBER
OF NEW FIXTURES

BASEMENT ELECTRICAL

1/4" = 1'-0"

DATE	REVISIONS	
12/4/12	REVISIONS	
11/23/11	HQA REVS	
11/16/11	N ELEV REV	
11/9/11	STRUCT REVS	
10/14/11	PERMIT	
9/29/11	PRELIM REVS	
8/27/11	PRELIM STRUCT	
8/14/11	PRELIMINARY	
MARK	DATE	DESCRIPTION

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SHEET TITLE
**BASEMENT
ELECTRICAL PLAN**

A-401

ELECTRICAL & LIGHTING SYMBOLS

- Ⓛ DUPLEX RECEPTACLE MOUNTED IN BASEBOARD. SEE A-301, U.O.N.
- Ⓛ DUPLEX RECEPTACLE MOUNTED AT FLOOR
- Ⓛ^{G.F.I.} G.F.I. DUPLEX RECEPTACLE W/GROUND FAULT INTERRUPTER
- Ⓛ^{EQUIP.} DEDICATED RECEPTACLE (APPLIANCES, ETC.)
- Ⓛ QUADRUPLEX RECEPTACLE
- Ⓛ SINGLE POLE SWITCH
- Ⓛ³ THREE-WAY SWITCH
- Ⓛ^D DIMMER SWITCH

- Ⓛ SWITCHED DUPLEX RECEPTACLE
- Ⓛ SMOKE DETECTOR. 120V OPERATED HARDWIRE
- Ⓛ CARBON MONOXIDE DETECTOR
- Ⓛ LIGHT FIXTURE, CLG. MOUNTED (SEE SCHEDULE FOR TYPE)
- Ⓛ PH TELEPHONE OUTLET
- Ⓛ CABLE TV OUTLET

LIGHT FIXTURE SCHEDULE

- Ⓛ CEILING SURFACE MT.
- Ⓛ UNDER CABINET (VERIFY LENGTH)
- Ⓛ BATH FAN LIGHT COMBINATION
- Ⓛ EXTERIOR FLOOD LIGHT
- Ⓛ WALL SURFACE, BATHROOM VANITY
- Ⓛ EXHAUST VENT TO ERV
- Ⓛ EXTERIOR WALL MOUNT
- Ⓛ RECESSED LR6 SHOWER LIGHT
- Ⓛ PENDANT LIGHT
- Ⓛ RECESSED LR6 DOWNLIGHT
- Ⓛ RECESSED WALL WASHER
- Ⓛ WALL SCENCE
- Ⓛ CEILING FAN W/ LIGHT
- Ⓛ 2X4 FLUORESCENT

GENERAL NOTES:

1. TBD
2. ELECTRICAL CONTRACTOR SHALL SIZE AND ARRANGE ALL CIRCUITS IN ACCORDANCE WITH THE NATIONAL ELECTRIC CODE AS WELL AS ALL LOCAL CODES.
3. WALL OUTLETS ARE TO BE MOUNTED 18" AFF UNLESS NOTED OTHERWISE.
4. SWITCHES ARE TO BE MOUNTED 4'-0" ABOVE FINISHED FLOOR UNLESS NOTED OTHERWISE.
5. MOUNTING HEIGHTS ARE TO BE VERTICAL CENTER OF THE EQUIPMENT TO THE FINISHED FLOOR ELEVATION.
6. ALL NEW SWITCH & OUTLET STYLES ARE TO BE APPROVED BY OWNER PRIOR TO INSTALLATION.
7. PROVIDE HARDWIRED SMOKE DETECTORS AS PER CODE.
8. ELECTRICIAN TO LOCATE ALL FIXTURES, SWITCHES, OUTLETS, ETC. PRIOR TO RUNNING WIRING. OWNER AND ELECTRICIAN TO MEET AT A MUTUALLY AGREED UPON TIME TO REVIEW LOCATIONS.
9. ALL PHONE DATA LOCATIONS TO BE UNDER ONE COMMON FACE PLATE.

SUSTAINABLE DESIGN GROUP

22923 WILDCAT RD
GAITHERSBURG, MD
20882

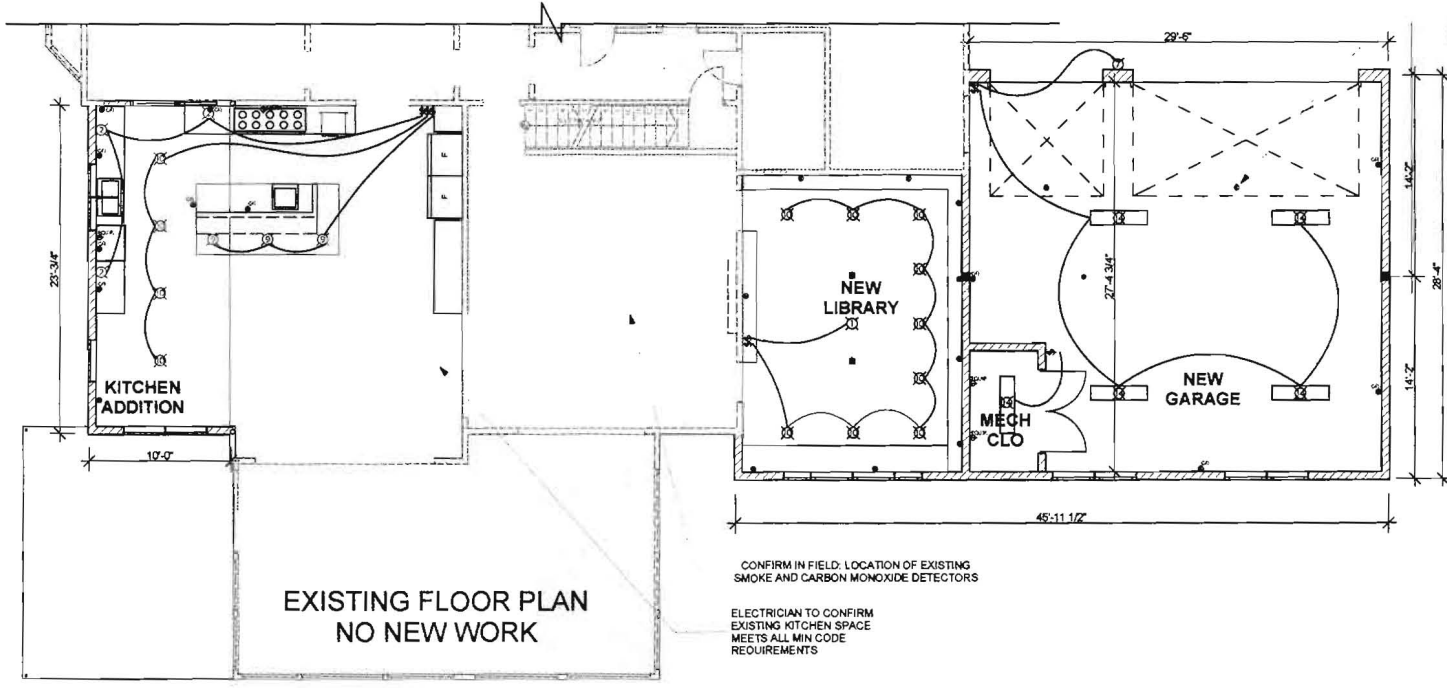
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LHANREVILLE, MD 21784
PH: 410-443-4400



YEHIA HASSANEIN RESIDENCE
15308 DOE HILL CT
WOODBINE, MD 21797



CONFIRM IN FIELD. LOCATION OF EXISTING SMOKE AND CARBON MONOXIDE DETECTORS

ELECTRICIAN TO CONFIRM EXISTING KITCHEN SPACE MEETS ALL MIN CODE REQUIREMENTS

EXISTING FLOOR PLAN
NO NEW WORK

1

1st FLOOR ELECTRICAL

1/4" = 1'-0"

1/24/12	REVISIONS	
1/23/11	HOA REVS	
1/16/11	N ELEV REV	
1/10/11	STRUCT REVS	
10/24/11	PERMIT	
8/28/11	PRELIM REVS	
8/27/11	PRELIM STRUCT	
8/14/11	PRELIMINARY	
MARK	DATE	DESCRIPTION

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ELECTRICAL & LIGHTING SYMBOLS		LIGHT FIXTURE SCHEDULE		GENERAL NOTES:	
①	DUPLEX RECEPTACLE MOUNTED IN BASEBOARD, SEE A-301, U.O.N.	①	CEILING SURFACE MT.	①	PENDANT LIGHT
②	DUPLEX RECEPTACLE MOUNTED AT FLOOR	②	UNDER CABINET (VERIFY LENGTH)	②	RECESSED LR6 DOWNLIGHT
③	G.F.I. DUPLEX RECEPTACLE W/GROUND FAULT INTERRUPTER	③	BATH FAN LIGHT COMBINATION	③	RECESSED WALL WASHER
④	DEDICATED RECEPTACLE (APPLIANCES, ETC.)	④	EXTERIOR FLOOD LIGHT	④	WALL SCENCE
⑤	QUADRUPLEX RECEPTACLE	⑤	WALL SURFACE, BATHROOM VANITY	⑤	CEILING FAN W/ LIGHT
⑥	SWITCHED DUPLEX RECEPTACLE	⑥	EXHAUST VENT TO ERV	⑥	2X4 FLUORESCENT
⑦	SMOKE DETECTOR, 120V OPERATED HARDWIRE	⑦	EXTERIOR WALL MOUNT		
⑧	CARBON MONOXIDE DETECTOR	⑧	RECESSED LR6 SHOWER LIGHT		
⑨	LIGHT FIXTURE, CLG. MOUNTED (SEE SCHEDULE FOR TYPE)				
⑩	TELEPHONE OUTLET				
⑪	CABLE TV OUTLET				
⑫	SINGLE POLE SWITCH				
⑬	THREE-WAY SWITCH				
⑭	DIMMER SWITCH				

SHEET TITLE
FIRST FLOOR ELECTRICAL PLAN

A-402

1. TBD
2. ELECTRICAL CONTRACTOR SHALL SIZE AND ARRANGE ALL CIRCUITS IN ACCORDANCE WITH THE NATIONAL ELECTRIC CODE AS WELL AS ALL LOCAL CODES.
3. WALL OUTLETS ARE TO BE MOUNTED 18" AFF UNLESS NOTED OTHERWISE.
4. SWITCHES ARE TO BE MOUNTED 4'-0" ABOVE FINISHED FLOOR UNLESS NOTED OTHERWISE.
5. MOUNTING HEIGHTS ARE TO BE VERTICAL CENTER OF THE EQUIPMENT TO THE FINISHED FLOOR ELEVATION.
6. ALL NEW SWITCH & OUTLET STYLES ARE TO BE APPROVED BY OWNER PRIOR TO INSTALLATION.
7. PROVIDE HARDWIRED SMOKE DETECTORS AS PER CODE.
8. ELECTRICIAN TO LOCATE ALL FIXTURES, SWITCHES, OUTLETS, ETC. PRIOR TO RUNNING WIRING. OWNER AND ELECTRICIAN TO MEET AT A MUTUALLY AGREED UPON TIME TO REVIEW LOCATIONS.
9. ALL PHONE DATA LOCATIONS TO BE UNDER ONE COMMON FACE PLATE.

1
A-201

GENERAL NOTE:
AT ALL JOINTS OF EXISTING FOOTINGS & NEW FOOTINGS & AT EXISTG CONC. WALLS & NEW WALLS, PIN WITH #5 REBAR DOWELS @ 16" O.C. EMBED 6" IN EXISTING AND 6" IN NEW

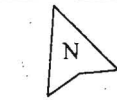
NEW TURN DOWN FOOTING AT GARAGE DOOR OPENINGS (ABOVE) PIN TO EXISTING W/ #5 REBAR DOWELS @ 16" O.C. EMBED 6"

NEW TURN DOWN SLAB TO MATCH LEVEL OF EXISTING SLAB AT GARAGE. AT JOINT OF EXISTING SLAB AND NEW SLAB, PROVIDE #5 REBAR DOWELS @ 16" O.C. EMBED 6" IN EXISTING SLAB AND 6" IN NEW SLAB

STEPPED FOOTINGS: STEP AS NEEDED AS PER SLOPE OF SITE. SEE SHEET A-304 FOR STANDARD REQUIREMENTS

1
A-204

1
A-203



YEHIA HASSANEIN RESIDENCE
13308 DOE HILL CT
WOODBINE, MD 21797

MARK	DATE	DESCRIPTION
1/24/12		REVISIONS
1/23/11		HOA REVS
1/19/11		IN ELEV REV
1/19/11		STRUCT REVS
1/14/11		PERMIT
9/29/11		PRELIM REVS
9/27/11		PRELIM STRUCT
-	9/14/11	PRELIMINARY

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SHEET TITLE
FOUNDATION PLAN

S-101

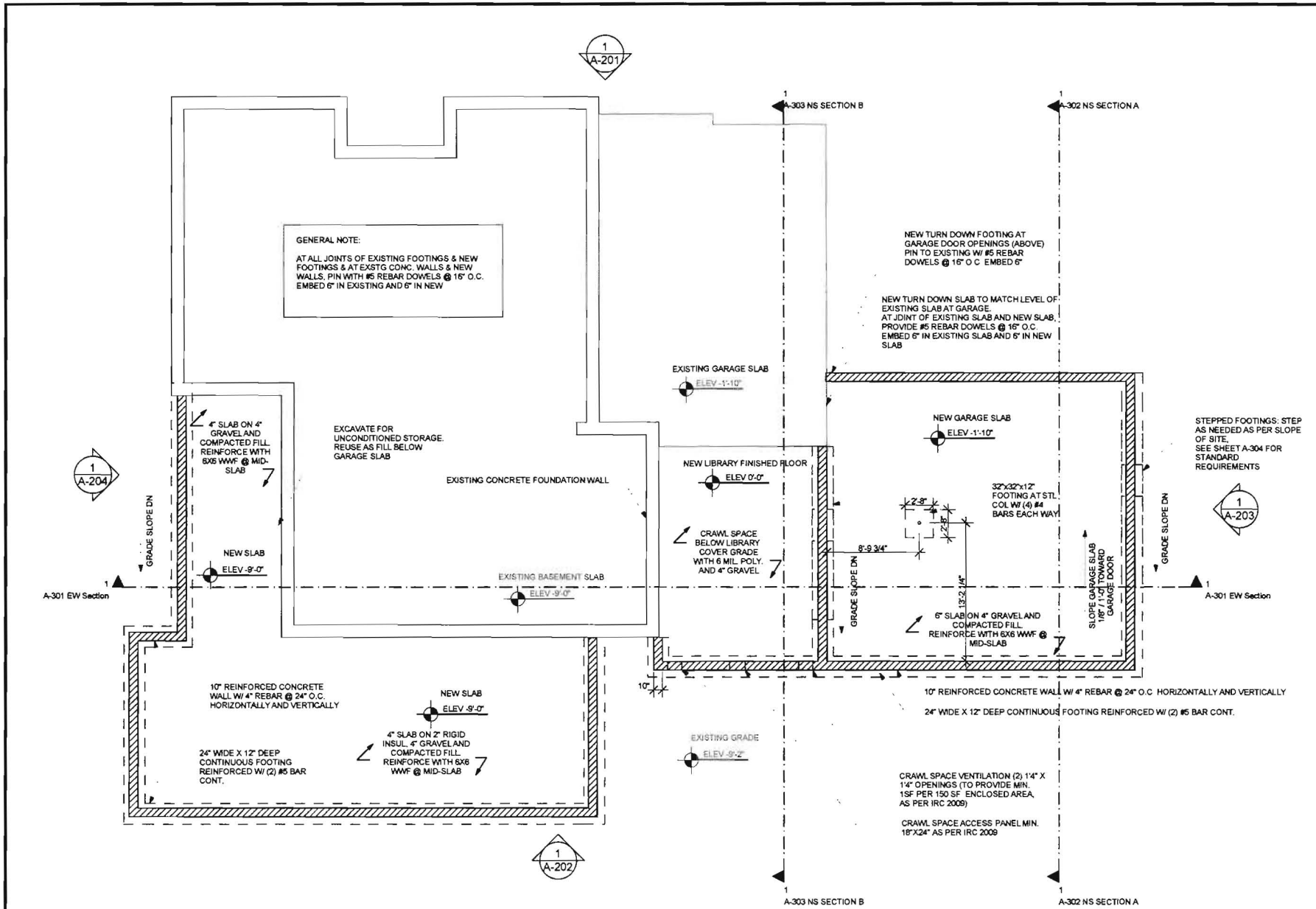
SUSTAINABLE DESIGN GROUP

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GAITHERSBURG, MD
20882

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3380 URBANA PIKE, SUITE 101
JAMHILLE, MD 21784
PH: 410-442-4400

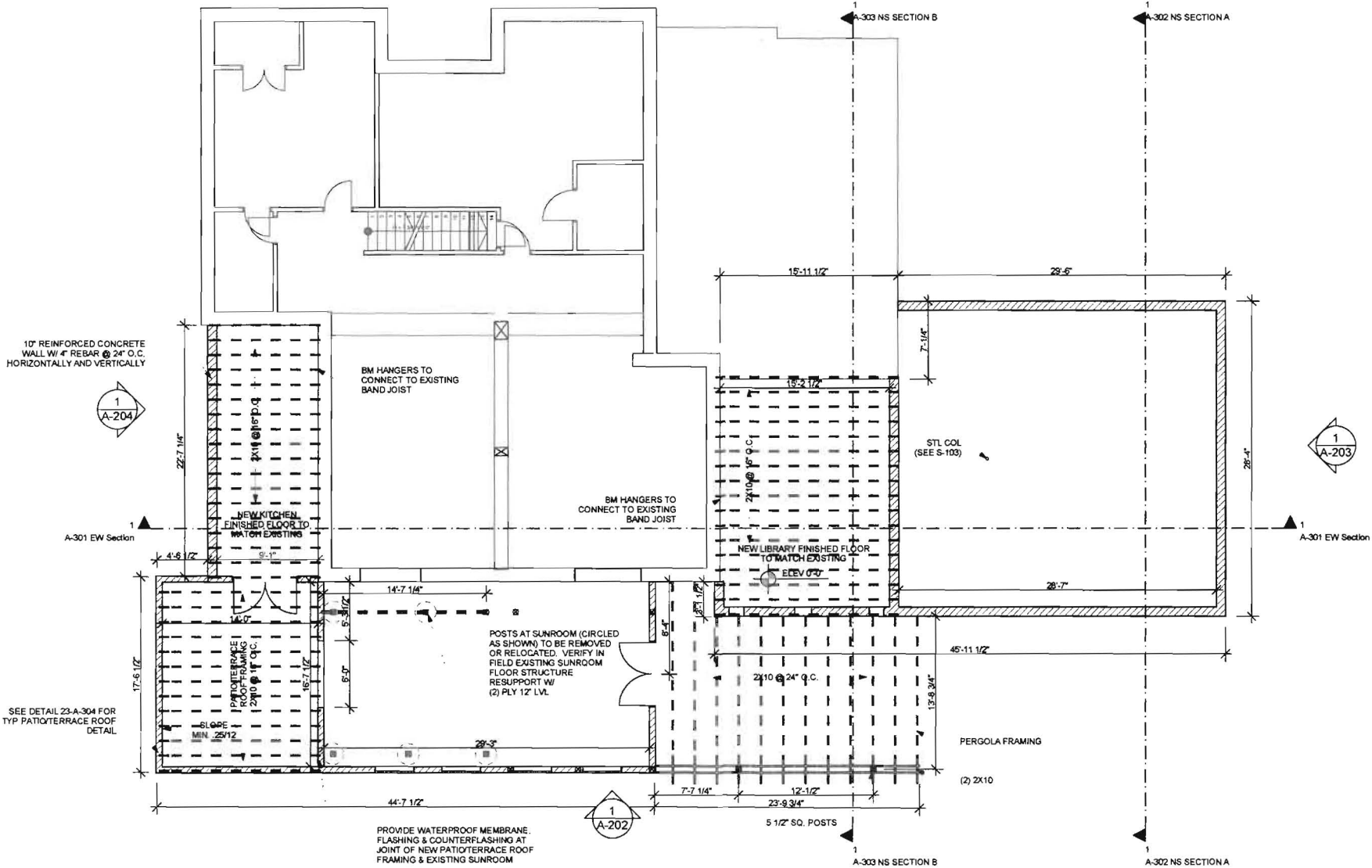


FOUNDATION

1/4" = 1'-0"

1

1
A-201



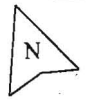
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JANESVILLE, MD 21764
PH: 410-442-4400



YEHIA HASSANEIN RESIDENCE
15308 DOE HILL CT
WOODBRIE, MD 21797

MARK	DATE	DESCRIPTION
1/24/12		REVISIONS
11/23/11		HOA REVS
11/16/11		N ELEV REV
11/9/11		STRUCT REVS
10/24/11		PERMIT
9/29/11		PRELIM REVS
9/27/11		PRELIM STRUCT
9/14/11		PRELIMINARY

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SHEET TITLE
FIRST FLOOR FRAMING PLAN

S-102

FIRST FLOOR FRAMING PLAN

1/4" = 1'-0"

**SUSTAINABLE
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PH: 410-448-4400



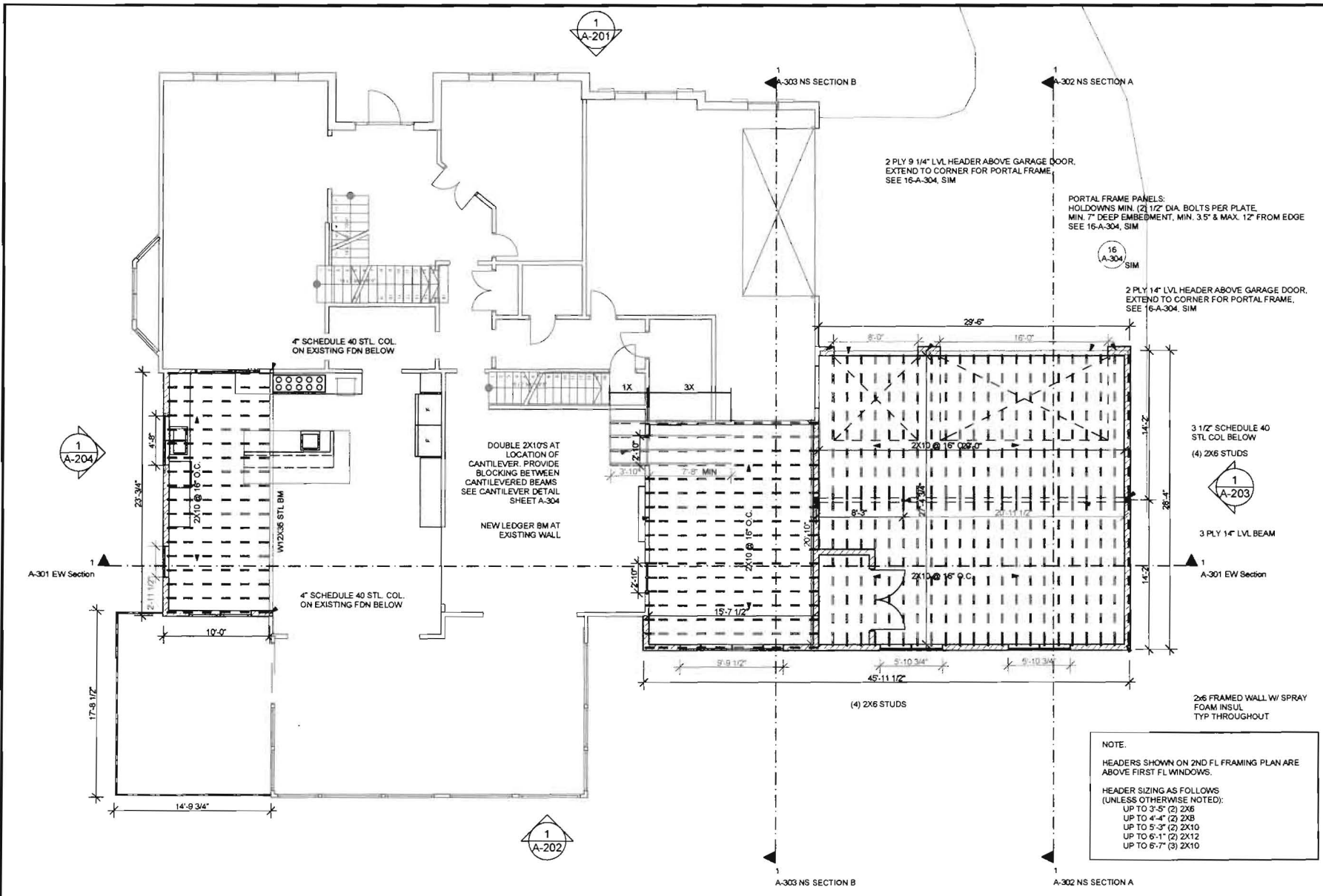
**YEHIA
HASSANEIN
RESIDENCE**
15308 DOE HILL CT
WOODBINE, MD 21797

MARK	DATE	DESCRIPTION
1/24/12		REVISIONS
11/23/11		HOA REVS
11/18/11		N ELEV REV
11/9/11		STRUCT REVS
10/14/11		PERMIT
9/29/11		PRELIM REVS
9/27/11		PRELIM STRUCT
9/14/11		PRELIMINARY

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SHEET TITLE
**SECOND FLOOR
FRAMING PLAN**

S-103



NOTE:
HEADERS SHOWN ON 2ND FL FRAMING PLAN ARE ABOVE FIRST FL WINDOWS.
HEADER SIZING AS FOLLOWS (UNLESS OTHERWISE NOTED):
UP TO 3'-5" (2) 2X8
UP TO 4'-4" (2) 2X8
UP TO 5'-3" (2) 2X10
UP TO 6'-1" (2) 2X12
UP TO 6'-7" (3) 2X10

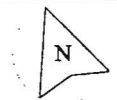
**SUSTAINABLE
DESIGN GROUP**

22923 WILDCAT RD
GAITHERSBURG, MD
20892

301 428 1040

CONSULTANTS
**STRUCTURAL
ENGINEERING
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2380 URSANA POB, SUITE 101
JANESVILLE, MD 21794
410-443-4400



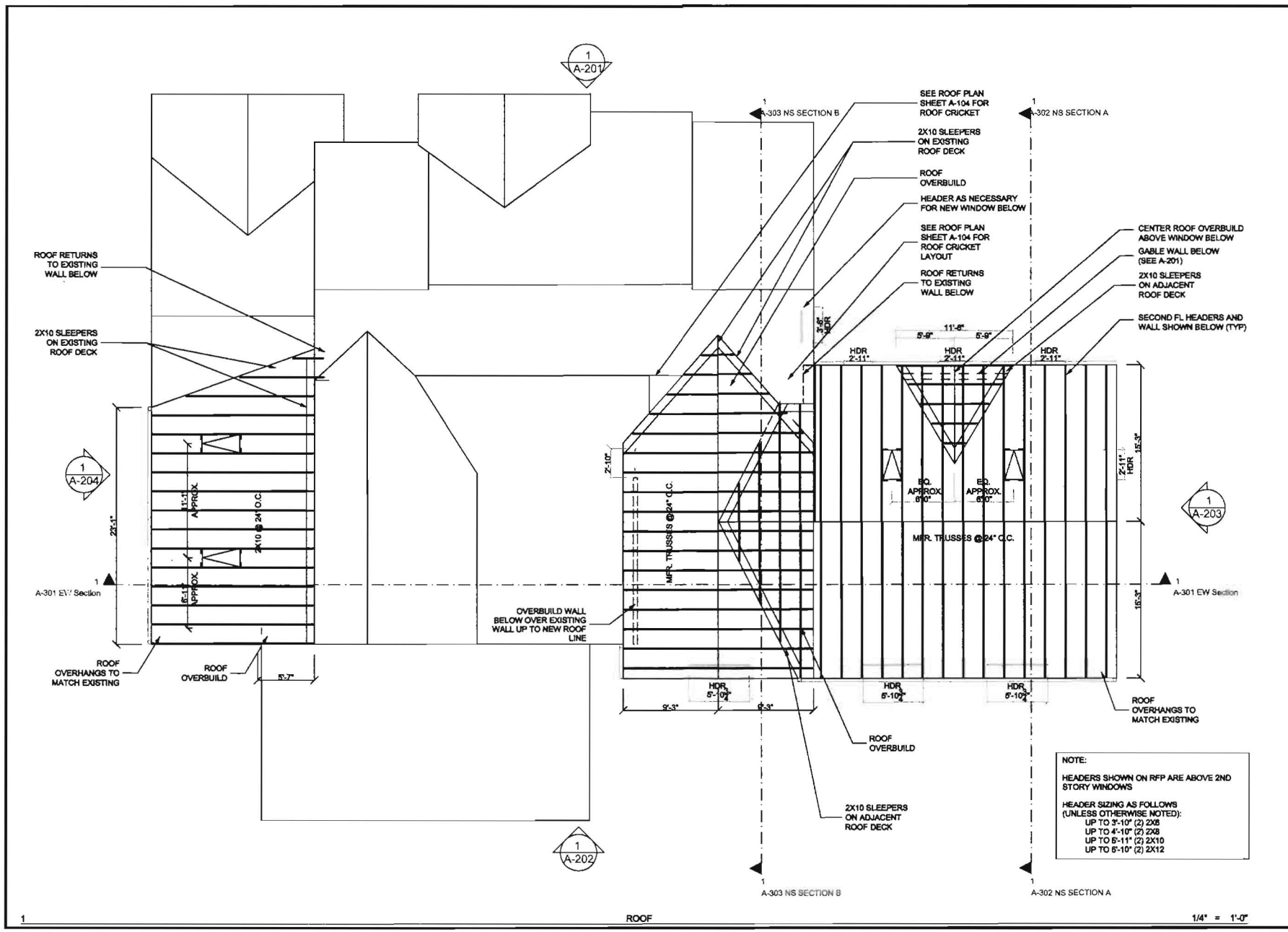
**YEHIA
HASSANEIN
RESIDENCE**
15308 DOE HILL CT
WOODBINE, MD 21797

MARK	DATE	DESCRIPTION
1/24/12		REVISIONS
11/23/11		HOA REVS
11/29/11		STRUCT REVS
10/16/11		PERMIT
8/29/11		PRELIM REVS
8/27/11		PRELIM STRUCT
8/14/11		PRELIMINARY

MARK	DATE	DESCRIPTION
PROJECT NO.:		
MODEL FILE:		
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SHEET TITLE
**ROOF FRAMING
PLAN**

S-104

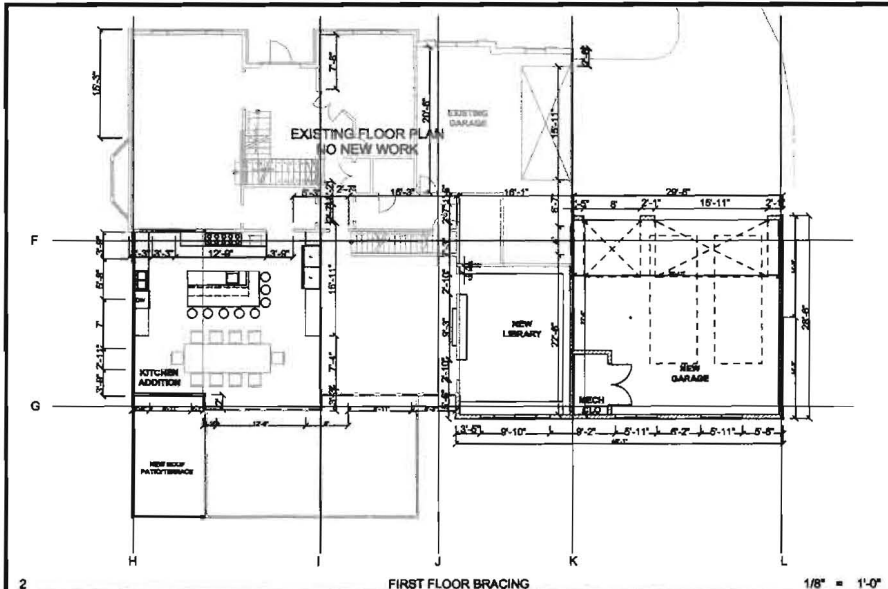


NOTE:
HEADERS SHOWN ON RFP ARE ABOVE 2ND
STORY WINDOWS

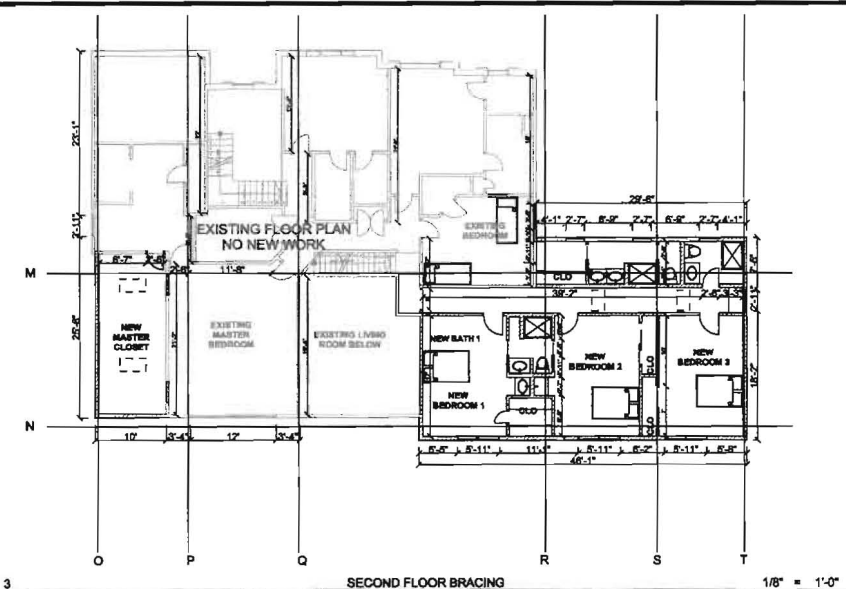
HEADER SIZING AS FOLLOWS
(UNLESS OTHERWISE NOTED):
UP TO 3'-10" (2) 2X8
UP TO 4'-10" (2) 2X8
UP TO 6'-11" (2) 2X10
UP TO 8'-10" (2) 2X12

ROOF

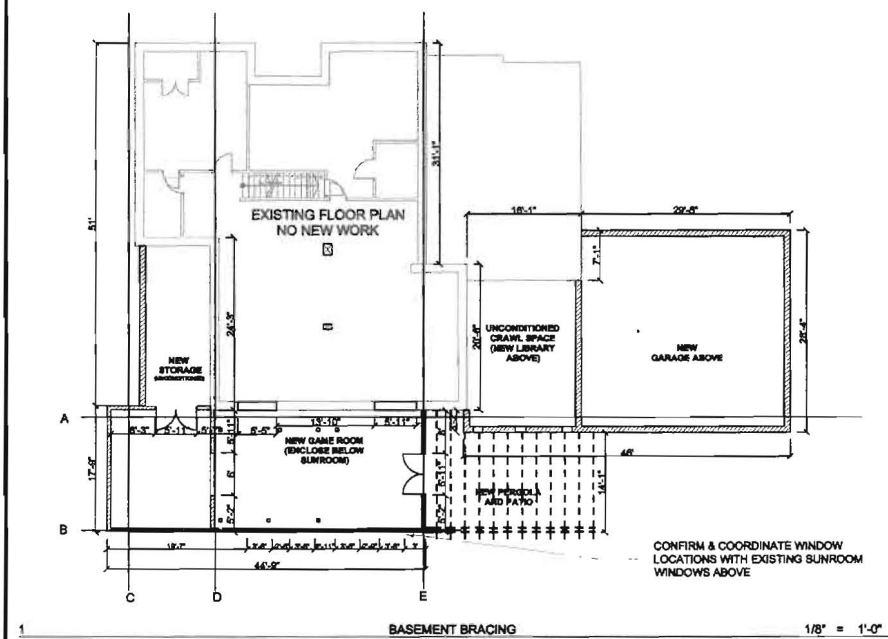
1/4" = 1'-0"



FIRST FLOOR BRACING 1/8" = 1'-0"



SECOND FLOOR BRACING 1/8" = 1'-0"



BASEMENT BRACING 1/8" = 1'-0"

	WALL LINE	METHOD	WALL HEIGHT	SPACING	LENGTH REQUIRED	MODIFIERS	MODIFIED REQUIREMENT	ACTUAL LENGTH	NOTES
BASEMENT	A	CS-WSP	8'-0"	18 FT	9.5 FT			11'-10" + EXSTG	
	B	CS-WSP	8'-0"	18 FT	8.5 FT			30'-2"	
	C	CS-WSP	8'-0"	12 FT	9.5 FT	1.3	12.35 FT	17'-8" + EXSTG	
	D	CS-WSP	8'-0"	12 FT	8.5 FT	1.3	8.45 FT	11'-2" + EXSTG	
	E	CS-WSP	8'-0"	30 FT	9.0 FT	1.3	11.7 FT	42'-3"	
FIRST FLOOR	F	CS-PF	9'-6"	23 FT					SEE S-103
	G	CS-WSP	9'-6"	23 FT	9.0 FT			28'-8"	
	H	CS-WSP	9'-6"	26 FT	9.0 FT	1.6	14.4 FT	29'-9"	
	I	GB	9'-6"	17 FT	13.0 FT	1.6	20.8 FT	29'-2"	
	J	GB	9'-8"	17 FT	13.0 FT	1.6	20.8 FT	43'-11"	
	K	CS-WSP	9'-8"	30 FT	9.0 FT	1.6	14.4 FT	22'-6"	
	L	CS-WSP	9'-6"	30 FT	9.0 FT	1.6	14.4 FT	28'-6"	
	M	GB	8'-0"	22 FT	9.5 FT			60'-8"	
	N	CS-WSP	8'-0"	22 FT	5.0 FT			38'-4"	
	SECOND FLOOR	O	CS-WSP	8'-0"	13 FT	3.5 FT	1.6	5.6 FT	28'-8" + EXSTG
P		GB	8'-0"	15 FT	7.0 FT	1.6	11.2 FT	21'-2" + EXSTG	
Q		GB	8'-0"	35 FT	12.5 FT	1.6	20.0 FT	42'-4"	
R		CS-WSP	8'-0"	16 FT	7.0 FT	1.6	11.2 FT	17'-9"	
S		GB	8'-0"	12 FT	7.0 FT	1.6	11.2 FT	16'-0"	
T		CS-WSP	8'-0"	12 FT	3.5 FT	1.6	5.8 FT	28'-7"	

SUSTAINABLE DESIGN GROUP

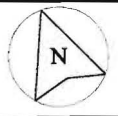
22923 WILDOAT RD
BAIHERSBURG, MD
20882

301 428 1040

CONSULTANTS

STRUCTURAL ENGINEERING UNLIMITED, LLC

3380 URSANA PIKE, SUITE 101
LAWRENCEVILLE, MD 21754
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YEHIA HASSANEIN RESIDENCE

13308 DOE HILL CT
WOODBRIDGE, MD 21797

DATE	REVISIONS	
1/24/12	REVISIONS	
11/23/11	HQA REVS	
11/16/11	IN ELEV REV	
11/8/11	STRUCT REVS	
10/14/11	PERMIT	
9/28/11	PRELIM REVS	
9/27/11	PRELIM STRUCT	
9/14/11	PRELIMINARY	
MARK	DATE	DESCRIPTION

PROJECT NO:
MODEL FILE:
CHKD BY: JOHN SPEARS
DRAWN BY: AUDRA HARLEMAN
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SHEET TITLE

WALL BRACING

WB-101

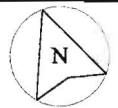
SUSTAINABLE DESIGN GROUP

22923 WILDCAT RD
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301 428 1040

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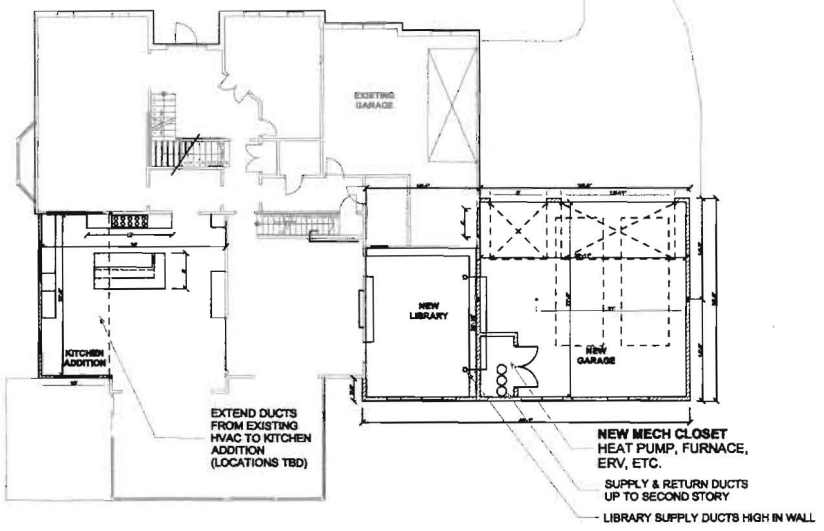
YEHIA HASSANEIN RESIDENCE
1308 DOB HILL CT
WOODBINE, MD 21797

DATE	REVISIONS
1/24/12	REVISIONS
11/23/11	HOA REVS
11/16/11	N ELEV REV
11/9/11	STRUCT REVS
10/14/11	PERMIT
8/29/11	PRELIM REVS
8/27/11	PRELIM STRUCT
8/24/11	PRELIMINARY
MARK	DATE DESCRIPTION

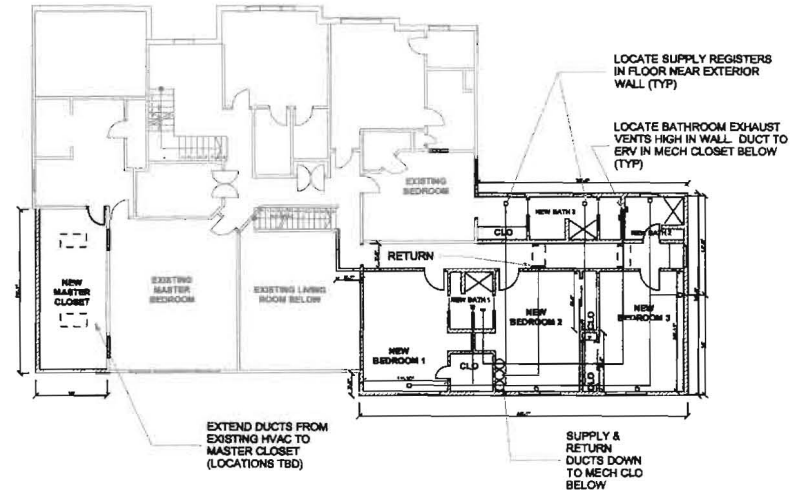
PROJECT NO:
MODEL FILE:
CHKD BY: JOHN SPEARS
DRAWN BY: AUDRA HARLEMAN
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SHEET TITLE
MECHANICAL

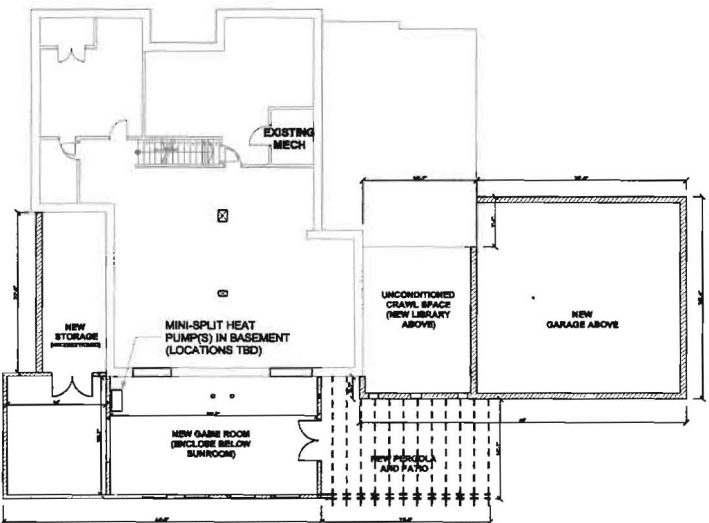
M-101



2 1ST FLOOR MECHANICAL DIAGRAM 1/8" = 1'-0"



3 2nd FLOOR MECHANICAL DIAGRAM 1/8" = 1'-0"



1 BASEMENT MECHANICAL DIAGRAM 1/8" = 1'-0"

HVAC SPECIFICATIONS

- Final HVAC system design to be provided by the selected licensed subcontractor in accordance with the schematic design provided. HVAC subcontractor to coordinate with the owner and the designers as needed to establish the performance specifications, chase and duct locations and features.
- HVAC subcontractor to be responsible for system sizing, performance and compliance with applicable codes.
- All supply and return ducts shall be in the conditioned space (unless otherwise noted) and sealed with an approved mastic. Duct tape or metal tape alone is not acceptable.
- The HVAC system shall be commissioned by the HVAC subcontractor to assure proper operation.
- The HVAC subcontractor shall provide the owner operations manual and all applicable owners' manuals and warranty information on all equipment installed and review with the owner the operation and necessary maintenance required for all systems installed.
- Heat, Cooling and DHW: Heat pump and gas furnace combination. Mini split heat pump(s) in basement addition, unless otherwise noted.
- Energy Recovery Ventilator (ERV): Provide an ERV. Exhaust from all new bathrooms and fresh air supply to the return air duct of the AC unit. Install fresh air intake and stale air exhaust vents at least 6 feet apart or according to the manufacturer's instructions to prevent cross contamination. Locate the fresh air intake vent at least 8 feet from the kitchen exhaust fan vent.
- Locate the HP, furnace and ERV in the mechanical room.
- Provide exhaust ventilation over the range in the kitchen.