



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: _____

Permit No.: P/1600038

Building Address: 3435 ROSEMARY LANE
City: ELICOTT CITY State: MD Zip Code: 21042
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: 22 Parcel: 213 Grid: 04
Zoning: RR: AEO Map Coordinates: _____ Lot Size: 2.249

Property Owner's Name: RONALD WEBBER
Address: 3435 ROSEMARY LANE
City: ELICOTT CITY State: MD Zip Code: 21042
Phone: 443 670 6030 Fax: _____
Email: _____

Existing Use: SINGLE FAMILY HOME
Proposed Use: SINGLE FAMILY HOME
Estimated Construction Cost: \$ 700,000
Description of Work: NEW ADDITION MASTER BEDROOM AND BATH EXPAND 2 CAR GARAGE NEW KITCHEN RENOVATE BATHS. GARAGE 24'x12'

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: STEVENS BUILDERS LLC
Address: 4527 TEN BARKS ROAD
City: BAYTON State: MD Zip Code: 21034
Phone: 410 571 7100 Fax: 410 571 4700
Email: MARK@STEVENSBUILDERS.COM

Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: STEVENS BUILDERS
Contact Person: MARK STEVENS
Address: SAME AS ABOVE
City: _____ State: _____ Zip Code: _____
License No.: MHRR 86 MVEL
Phone: _____ Fax: _____
Email: _____

Engineer/Architect Company: LEHMAN ASSOCIATES
Responsible Design Prof.: GEORGE MINE HOWARD ROAD
Address: HIGHLAND MD
City: HIGHLAND State: MD Zip Code: 20777
Phone: 301 254 1127 Fax: _____
Email: LEHMAN@LAPC.US

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	Depth Width
Gross area, sq. ft./floor:	1 st floor: <u>23 x 24</u>
	2 nd floor: _____
Area of construction (sq. ft.):	Basement: <u>23 x 24</u>
	<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: <u>4</u>
<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 checked="" 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 checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input checked="" 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 checked="" 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: MARK STEVENS
Email Address: MARK@STEVENSBUILDERS.COM
Title/Company: J.P. STEVENS BUILDER

Print Name: MARK STEVENS
Date: 1/2/16

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>3/2/16</u>	<u>R. Buehler</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	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

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

2/19/2016

Jeff Williams
Howard County Health Department

RE: 3485 Rosemary Lane, Ellicott City, MD 21042

Dear Jeff:

We are writing to request a waiver for the perk certification for the above referenced property. We have applied for a building permit to renovate the home.

Previous discussions with you and with Fisher Collins and Carter resulted in the acknowledgement that the property has a current working system that was originally approved for a 4 bedroom home.

Based on our previous conversations and meetings, we request this waiver so that we can begin renovations on the home.

Attached is a site plan and plans for the proposed renovation. Building permit number B16000318 is in for application.

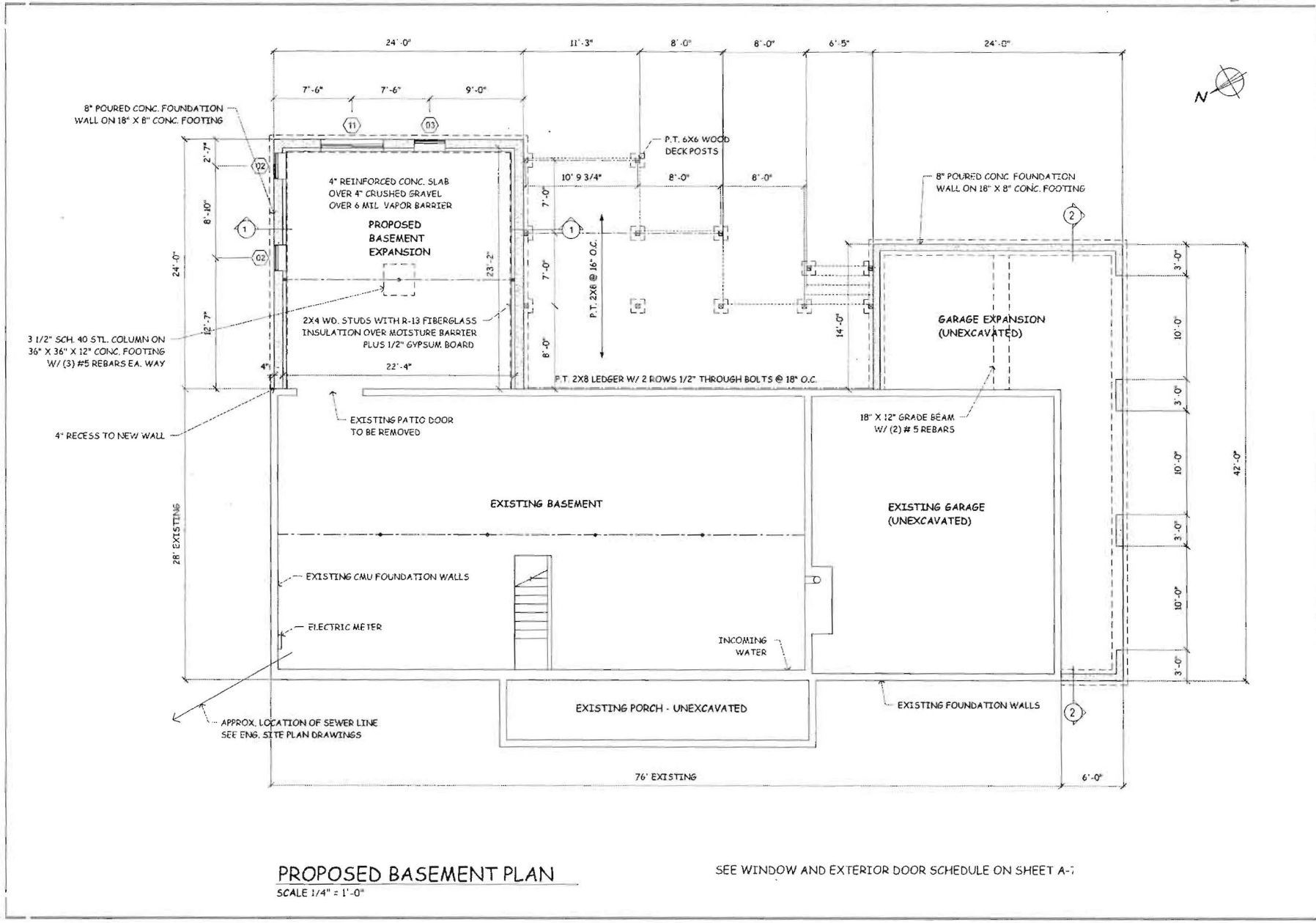
Sincerely,

Ronald Weber
Owner

Ronald L Weber

2/3/16
Approved
M J Davis

OK! REB 3/2/2016



PROPOSED BASEMENT PLAN
SCALE 1/4" = 1'-0"

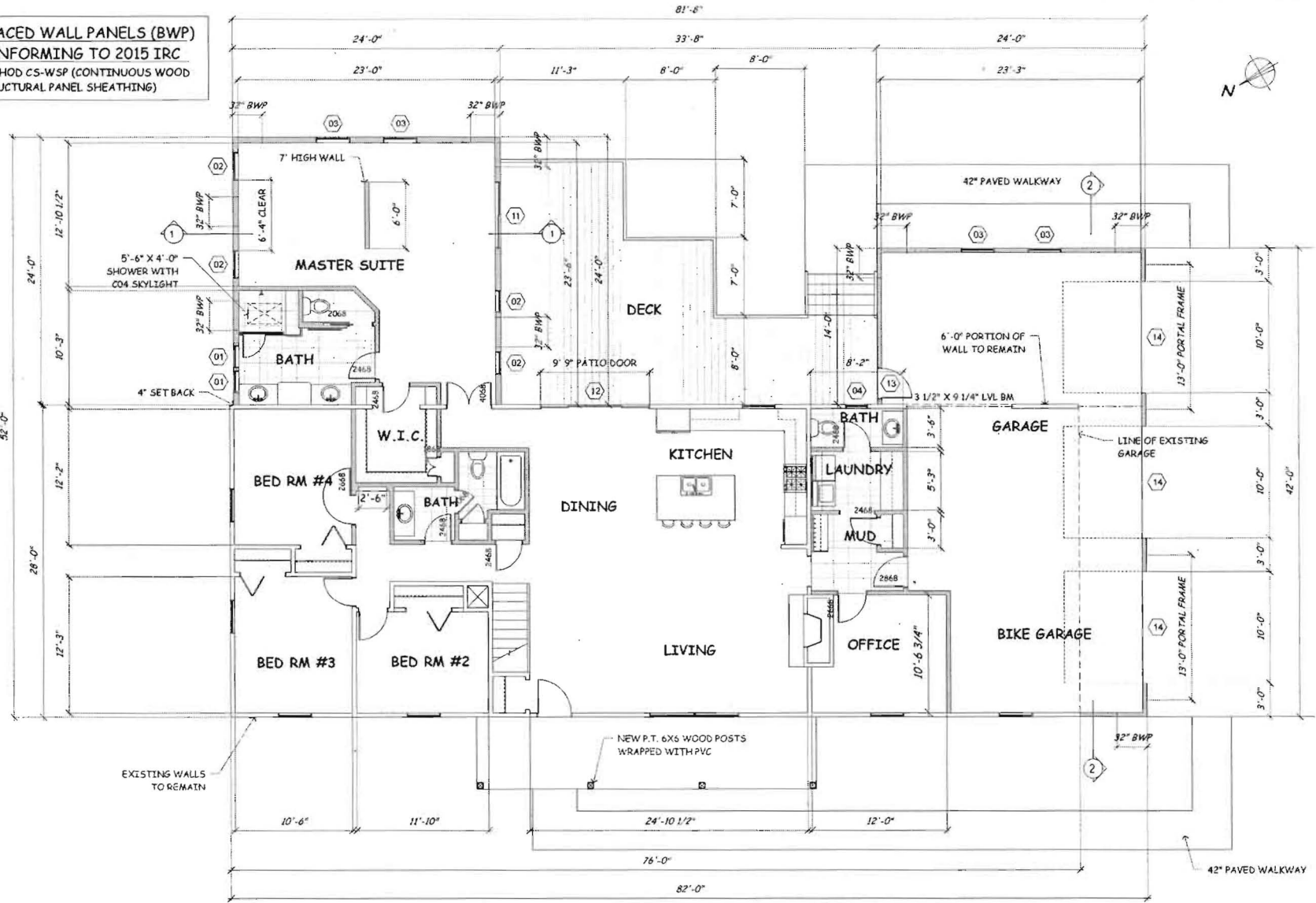
SEE WINDOW AND EXTERIOR DOOR SCHEDULE ON SHEET A-7

4 Bedrooms

'OK' reB 3/2/2016

BRACED WALL PANELS (BWP)
CONFORMING TO 2015 IRC
METHOD CS-WSP (CONTINUOUS WOOD
STRUCTURAL PANEL SHEATHING)

DA
PC
LEHMAN ASSOCIATES, PC



PROPOSED FLOOR PLAN
SCALE 1/4" = 1'-0"

SEE ENLARGED PLAN AND DETAILS OF MASTER BATH ON SHEET A-10
SEE ENLARGED PLAN AND DETAILS OF LAUNDRY/MUD ON SHEET A-10
SEE WINDOW AND EXTERIOR DOOR SCHEDULES ON SHEET A-7

PROPOSED ADDITIONS AND INTERIOR RENOVATIONS TO THE RESIDENCE OF
JOHN AND REBECCA LOGAN
3485 ROSEMARY LANE, ELLICOTT CITY, MARYLAND 21042

DATE: 01.18.16
BID & PERMIT

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