



# 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: 11-6-14

Permit No.: B14009065

Building Address: 12441 WATKINS BRIDGE Lane  
City: Clarksville State: MD Zip Code: 21029  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: WALNUT GROVE  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 79  
Tax Map: 0028 Parcel: 0074 Grid: 0018  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 45,146 sq ft

Existing Use: vacant land  
Proposed Use: SFD  
Estimated Construction Cost: \$ 600,000  
Description of Work: construct SFD

Occupant or Tenant: D/A  
Was tenant space previously occupied?  Yes  No  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Property Owner's Name: GUYTON RASEEV - NICHOL  
Address: 6413 Empty Song RD  
City: Columbia State: MD Zip Code: 21044  
Phone: 301-440-7372 Fax: \_\_\_\_\_  
Email: guyton\_raseev@earthlink.net

Applicant's Name & Mailing Address, (If other than stated herein)  
Applicant's Name: JENNIFER DUNCAN - GOODWIN PIPER  
Address: 2320 W ...  
City: Clarksville State: MD Zip Code: 21093  
Phone: 410-771-2725 Fax: \_\_\_\_\_  
Email: j.duncan@... .com

Contractor Company: ...  
Contact Person: JENNIFER DUNCAN  
Address: ...  
City: Clarksville State: MD Zip Code: 21093  
License No.: (1412)  
Phone: 410-771-2725 Fax: \_\_\_\_\_  
Email: ...

Engineer/Architect Company: DW TAYLOR  
Responsible Design Prof.: DW TAYLOR  
Address: 6034 ...  
City: Clarksville State: MD Zip Code: 21042  
Phone: 410-909-1121 Fax: 410-771-2724  
Email: ...

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 <sup>st</sup> floor: <u>...</u>	2 <sup>nd</sup> floor: <u>...</u>
Area of construction (sq. ft.):	Basement:	
Use group:	<input checked="" type="checkbox"/> Finished Basement <u>...</u>	
	<input checked="" type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>4</u>	
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>	
<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	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Heating System</b>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>619000352</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: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Title/Company: \_\_\_\_\_

Print Name: \_\_\_\_\_  
Date: \_\_\_\_\_

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>1/20/2015</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>100</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>11174</u>



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

Date: 11/6/14  
To: Robert Bricker, Health Department  
(Person's Name and Division)  
From: Seannine Ducey (443) 691 2725  
(Your Name, Company Name and Telephone Number)  
Subject: Project name LOT 79 WALNUT GROVE (Gupta)  
Project site address 12441 WATKINS BRIDGE LN  
Permit Number ~~455~~ B19004065 SDP # \_\_\_\_\_  
Other information pertinent to this project Application submitted

Please 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 Architectural plans (be specific). *re: Building Permit Application submitted 11/6/14*
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # \_\_\_\_\_
- Other copy site plan

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 SIGNED AND SEALED, 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 IS 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 CHO

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

Sarah@Cairn  
Customhomes.com

12441 Watkins  
Bridge Lane

BUREAU OF ENVIRONMENTAL HEALTH  
HOWARD COUNTY HEALTH DEPT.

NOV 12 2011

RECEIVED



# GOODIER BUILDERS

## GUPTA RESIDENCE

BID & PERMIT ONLY

*Floor Plans  
approvable  
for 5 bedrooms.  
(see 1st Floor Conservatory)  
ref 11/24/14*

### DRAWING INDEX

COVER			
REC-1 RESIDENTIAL SPECIFICATIONS			
AD-1 WALL SECTIONS			
AD-2 TYP. CONSTRUCTION DETAILS			
AD-3a FLASHING DETAILS			
AD-3b WEATHER BARRIER MEMBRANE DETAILS			
A1.1 FRONT ELEVATION			
A1.2 REAR ELEVATION			
A1.3 RIGHT SIDE ELEVATION			
A1.4 LEFT SIDE ELEVATION			
A2.1 FOUNDATION PLAN			
A3.1 FIRST FLOOR PLAN			
A4.1 SECOND FLOOR PLAN			
A5.1 BUILDING SECTIONS			
A5.2 BUILDING SECTIONS			
A5.3 BUILDING SECTIONS			
A5.4 DETAILS			
A5.5 DETAILS			
S1 BASEMENT LATERAL BRACING PLAN			
S2 FIRST FLOOR LATERAL BRACING PLAN			
S3 SECOND FLOOR LATERAL BRACING PLAN			
S4 LATERAL BRACING SPECIFICATIONS & DETAILS			

### 2012 IBCC ENERGY EFFICIENCY

CODE SECTION	STANDARD (MINIMUM)
R301 CLIMATE ZONE	4
R402 COMPLIANCE METHOD:	* MANDATORY AND PRESCRIPTIVE PROVISIONS*
R402.1 ATTIC INSULATION:	R-49
R402.1.1 HOOD FRAME WALL:	R-20 OR R-13 + R-5 CONTINUOUS INSULATION
R402.1.2 BASEMENT WALL INSULATION:	R-10R-10 FOIL FACED CONTINUOUS UNINTERRUPTED BATTIS FULL HEIGHT
R402.1.3 CRAWL SPACE WALL INSUL:	R-10R-10 FOIL FACED CONTINUOUS BATTIS FULL HEIGHT EXTENDING FROM FLOOR ABOVE TO FINISH GRADE LEVEL AND THEN VERTICALLY OR HORIZONTALLY AN ADDITIONAL 2'-0" R-19 BATT INSULATION
R402.1.4 FLOOR INSULATION OVER UNCONDITIONED SPACE:	
R402.1.5 WINDOW U-VALUES/SHGC:	0.35 (U-VALUE) & 0.40 (SHGC)
R402.2.1 SLAB ON GRADE FLS. < 12" BELOW GRADE:	R-10 RIGID FOAM BOARD UNDER SLAB EXTENDING EITHER 2'-0" HORIZONTALLY OR 2'-0" VERTICALLY
R402.2.2 ATTIC ACCESS:	ATTIC ACCESS SCUTTLE SHALL BE WEATHERSTRIPPED & INSULATED R-49
R402.4 BUILDING THERMAL ENVELOPE (AIR LEAKAGE):	EXTERIOR WALLS & PENETRATIONS WILL BE SEALED PER THIS SECTION OF THE 2012 IBCC W/ CALK, GASKETS, WEATHERSTRIPPING OR AN AIR BARRIER OF SUITABLE MATERIAL
R402.4.1 BUILDING ENVELOPE TIGHTNESS TEST:	BUILDING ENVELOPE & TIGHTNESS & INSULATION INSTALLATION MUST MEET THE INSULATION CRITERIA LISTED IN TABLE 402.4.1.2. A BLOWER DOOR AIR INFILTRATION TEST SHALL BE PERFORMED IN ALL UNITS. SEE ALSO SECTION R303.4 OF THE 2012 IRC
R402.4.2 FIREPLACES:	ALL WOOD BURNING MASONRY FIREPLACES SHALL HAVE TIGHT-FITTING FLUE DAMPERS & OUTDOOR COMBUSTION AIR. FIREPLACES SHALL HAVE GASKETED DOORS RECESSED LUMINARIES INSTALLED IN THE BUILDING THERMAL ENVELOPE SHALL BE SEALED TO LIMIT AIR LEAKAGE
R402.4.4 RECESSED LIGHTING:	
R403.1 THERMOSTAT:	ALL DWELLING UNITS WILL HAVE AT LEAST (1) PROGRAMMABLE THERMOSTAT FOR EACH SEPARATE HEATING AND COOLING SYSTEM PER 2012 IBCC SECTION 403.1 WHERE A HEAT PUMP SYSTEM HAVING SUPPLEMENTARY ELECTRIC RESISTANCE HEAT IS USED THE THERMOSTAT SHALL PREVENT THE SUPPLEMENTARY HEAT FROM COMING ON WHEN HEAT PUMP CAN MEET HEATING LOAD.
R403.2.1 MECHANICAL DUCT INSULATION:	SUPPLY DUCTS IN ATTIC R-8 MINIMUM. SUPPLY DUCTS OUTSIDE OF CONDITIONED SPACES R-8 MINIMUM. ALL OTHER DUCTS EXCEPT THOSE LOCATED COMPLETELY INSIDE THE BUILDING THERMAL ENVELOPE R-6 MINIMUM. DUCTS LOCATED UNDER CONCRETE SLABS MUST BE R-6 MIN. COMPLY WITH SECTION M602.4.1 OF THE IRC.
R403.2.2 DUCT SEALING:	ALL DUCTS, AIR HANDLERS, FILTER BOXED SHALL BE SEALED. JOINTS AND SEAMS WILL COMPLY WITH SECTION M602.4.1 OF THE IRC. A DUCT TIGHTNESS TEST ( "DUCT BLOWER" DUCT TOTAL LEAKAGE TEST) WILL BE PERFORMED ON ALL HOMES AND SHALL BE VERIFIED BY EITHER A POST CONSTRUCTION TEST OR ROUGH-IN TEST. DUCT TIGHTNESS TEST IS NOT REQUIRED IF THE AIR HANDLER AND ALL DUCTS ARE LOCATED WITHIN THE CONDITIONED SPACE.
R403.5 MECHANICAL VENTILATION:	OUTDOOR (MAKE-UP) AIR WILL BE BROUGHT INTO THE HOME THRU A DUCT WITH AN AUTOMATIC OR GRAVITY DAMPER.
R403.6 EQUIPMENT SIZING:	SHALL COMPLY WITH R403.6
R404.1 LIGHTING EQUIPMENT:	A MINIMUM OF 75% OF ALL LAMPS (LIGHTS) MUST BE HIGH EFFICACY LAMPS. MINIMUM EFFICIENCY ESTABLISHED BY NAECA.
R404.2 WATER HEATER:	ALL MECHANICAL TESTING TO BE BY:
R404.3 MECHANICAL TESTING:	THIS CONTRACTOR IS ALSO RESPONSIBLE FOR GENERATING CERTIFICATE OF COMPLIANCE AND AFFIXING TO ELECTRICAL PANEL.

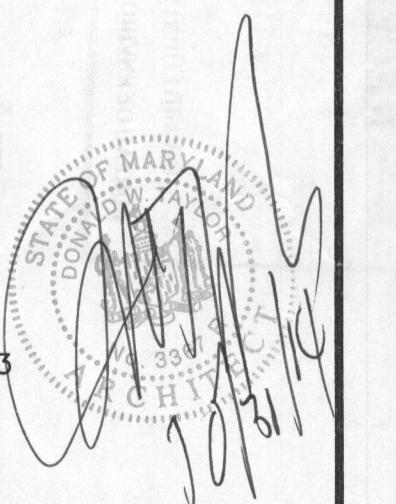
NOTE: \* ALTERNATIVE COMPLIANCE BY PERFORMANCE ALTERNATIVE WHEN PREPARED BY ENERGY PROFESSIONAL (ENERGY ANALYSIS OR IA ALTERNATIVE)  
\*\* R-30 IS DEEMED SATISFACTORY WHEN FULL UNCOMPRESSED THICKNESS OF R-30 IS MAINTAINED OVER TOP PLATE AND AT THE EAVES. (REQUIRES MIN. 1/4" GUEL)  
- BUILDER CONTRACTOR SHALL CONFIRM WITH LOCAL JURISDICTION SPECIFIC REQUIREMENTS FOR DOCUMENTATION AND/OR CERTIFICATION OF COMPLIANCE.

### PROJECT DESIGN DATA

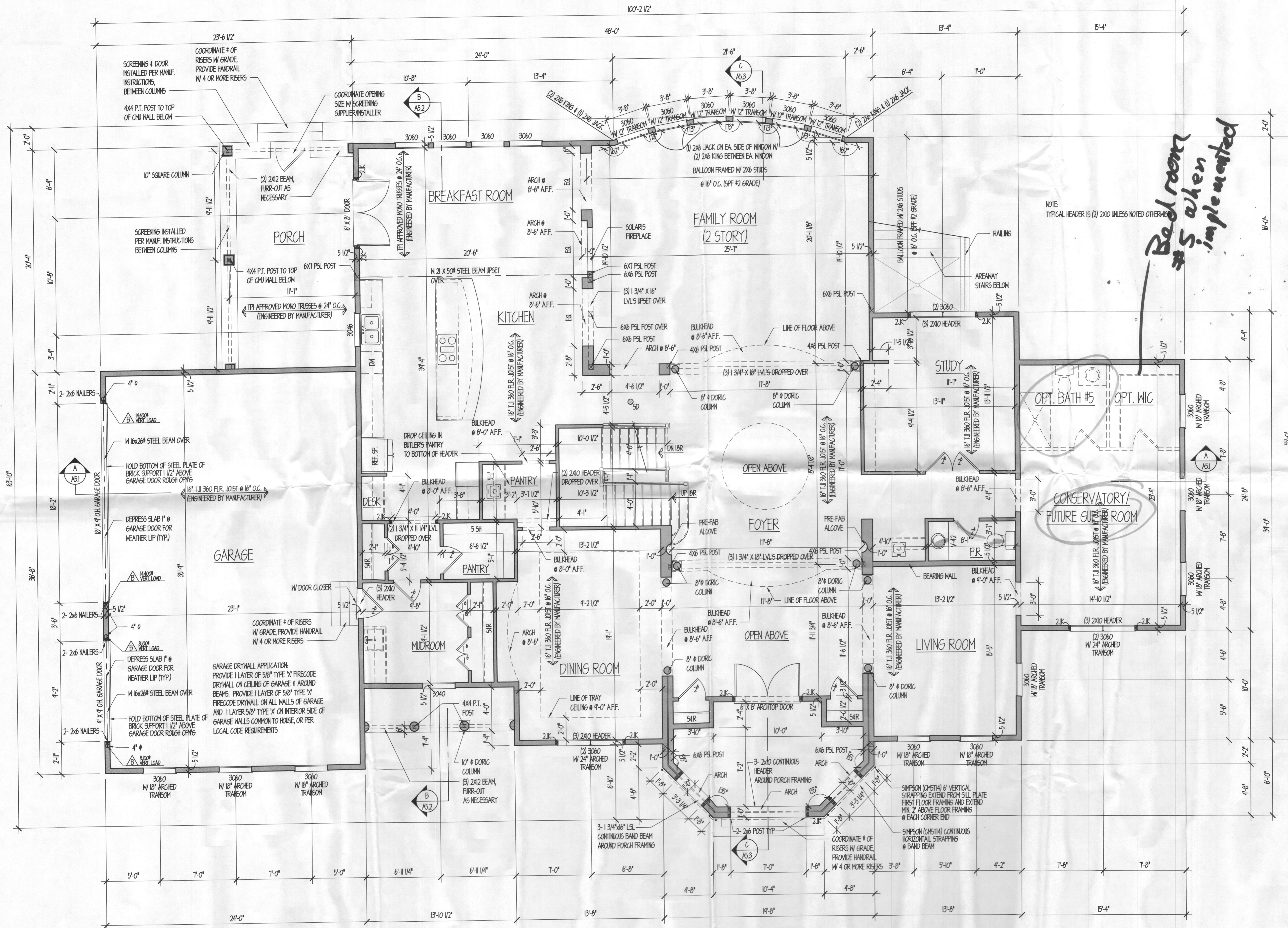
APPLICABLE STANDARDS	
THE FOLLOWING DATA AND ACCOMPANYING SPECIFICATIONS ARE BASED ON THE GENERAL REQUIREMENTS OF THE 2012 EDITION OF THE INTERNATIONAL RESIDENTIAL CODE FOR ONE & TWO FAMILY DWELLINGS AND ALL STATE AND LOCAL JURISDICTION AMENDMENTS. THEY ARE INTENDED TO BE APPLICABLE ONLY TO DETACHED ONE AND TWO FAMILY DWELLINGS AND MULTIPLE, ATTACHED SINGLE-FAMILY DWELLINGS, NOT MORE THAN THREE STORIES IN HEIGHT (EXCLUDING BASEMENTS) WITH SEPARATE INDEPENDENT MEANS OF EGRESS. TWO-FAMILY DWELLINGS SHALL BE COMPLETELY SEPARATED FROM EACH OTHER BY A ONE-HOUR FIRE RATED WALL OR FLOOR SEPARATION ASSEMBLY. TOWNHOUSE DWELLINGS SHALL BE SEPARATED BY EITHER (2) ONE-HOUR RATED ASSEMBLIES OR A COMMON ONE-HOUR FIRE RATED WALL ASSEMBLY. NFPA-80 FIRE SPRINKLER SYSTEM SHALL BE INSTALLED IN ALL DWELLINGS.	
BUILDING CRITERIA	LISTED ASSEMBLIES (WHERE APPLICABLE)
RESIDENTIAL SINGLE FAMILY CONSTRUCTION TYPE: (R-3) V-B (5-B) CLIMATE & GEOGRAPHIC DESIGN CRITERIA	1-HOUR RATING: (ULR305 (WALL)) (ULR534 (OPEN WEB FLOOR TRUSSES)) (ULR544 (I-JOIST)) (ULR512 (MIN. 2X10 JOIST))
FLOOR LIVE LOAD: 40 PSF ROOF LIVE LOAD: 30 PSF SNOW LOAD (Pg): 30 PSF WIND SPEED (3 SEC GUST): 10 MPH, EXPOSE C ATTICS W/O STORAGE: 10 PSF ATTICS W/ STORAGE: 20 PSF HABITABLE ATTICS: 30 PSF STAIRS: 40 PSF DECKS & BALCONIES (EXT.): 40 PSF GUARD & HANDRAILS: 200# (CONT. ANY DIR.) SEISMIC CATEGORY: B (LIGHT FRAME STRUCTURAL SYSTEM WITH SHEAR WALLS)	2-HOUR RATING: (ULR334 (SINGLE WALL)) (FM11360 (DOUBLE WALL)) (ULR336 (SHAFT WALL))
CONCRETE WEATHERING: SEVERE TERMITE INFESTATION: MODERATE TO HEAVY DECAY PROBABILITY: MODERATE ICE UNDERLAYMENT: YES FROST DEPTH: 32"	MIND BRACING COMPLIANCE FOR MIND BRACING AS SPECIFIED IN THE IRC-R602.10 HAS BEEN SATISFIED BY "CONTINUOUS SHEATHED WOOD STRUCTURAL PANELS" (CS-MFR) AND ENGINEERED ALTERNATIVE METHODS AS REQUIRED. REFER TO DRAWINGS FOR SPECIFIC REQUIREMENTS.
NOTE: VALUES SHOWN ARE MINIMUM - CONFIRM WITH LOCAL CODE OFFICIAL PRIOR TO CONSTRUCTION	FIRE RESISTANT CONSTRUCTION (REQUIRED) EXTERIOR WALLS > 3' FIRE SEPARATION DISTANCE: 0 HOUR EXTERIOR WALLS < 3' FIRE SEPARATION DISTANCE: 1 HOUR DWELLING UNIT SEPARATION (MINIMUM): 1 HOUR REFER TO DRAWINGS FOR SPECIFIC REQUIREMENTS

ARCHITECT :  
**dw taylor**  
associates inc.  
ARCHITECT

5024 DORSEY HALL DRIVE SUITE 203  
ELLCOTT CITY, MARYLAND 21042  
TELEPHONE (410) 964 1181  
FAX (410) 997 2924  
INFO@DWTAYLOR.COM



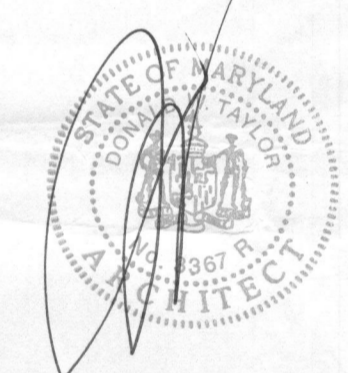
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FIRST FLOOR PLAN

NOTE:  
TYPICAL HEADER IS (2) 2X10 UNLESS NOTED OTHERWISE

*Bed room #5 when implemented*



DRAWINGS PRINTED ON 11X17 ARE SHOWN AT HALF OF THE NOTED SCALE.  
PROFESSIONAL CERTIFICATION: 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 # 3367-R, EXPIRATION DATE 10/7/15

**dw taylor**  
associates, inc  
ARCHITECT

5024 DORSEY HALL DR. SUITE 203 ELICOTT CITY, MD 21042  
P: (410) 984-1181 F: (410) 997-2924 www.dwtaylor.com

BID & PERMIT ONLY

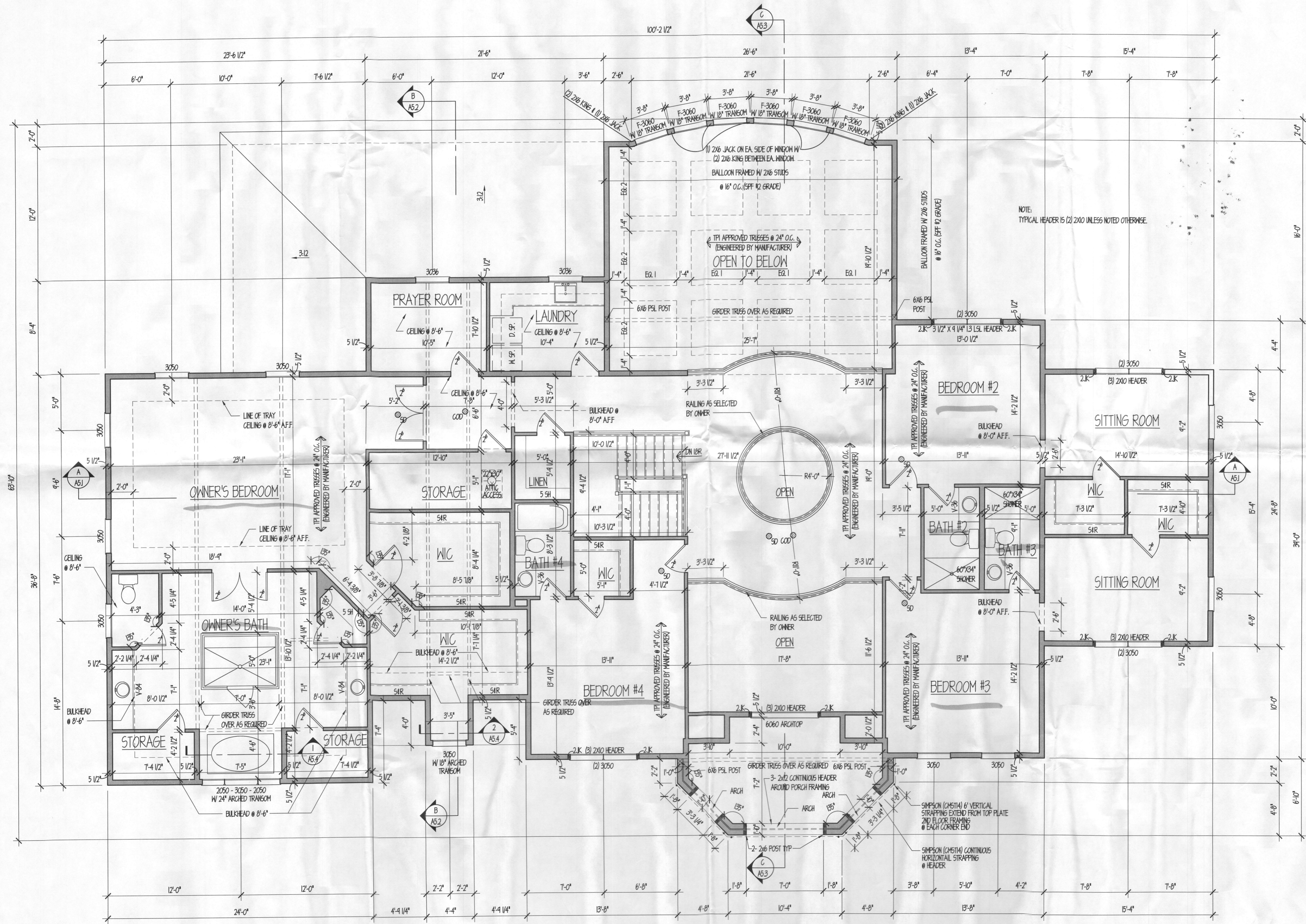
REVISIONS	
date	remarks

drawn by	ATH	checked by	TOM 10/31/14
scale	1/4" = 1'-0"	date	10/31/14

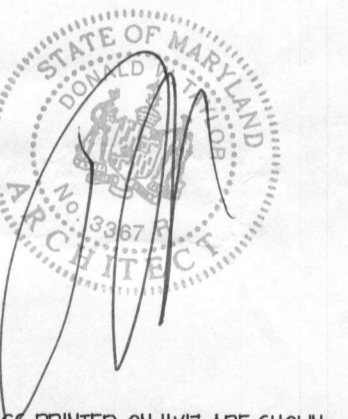
PROJECT TITLE  
**GOODIER BUILDERS  
GUPTA RESIDENCE**

CONTENT  
**FIRST FLOOR PLAN**

PROJECT NUMBER	DRAWING NUMBER
2451	A3.1



SECOND FLOOR PLAN



DRAWINGS PRINTED ON IITX ARE SHOWN AT HALF OF THE NOTED SCALE.  
 PROFESSIONAL CERTIFICATION: 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 # 3387-6, EXPIRATION DATE 10/7/15.

**dw taylor**  
 associates inc  
 ARCHITECT

5024 DORSEY HALL DR, SUITE 203 ELLICOTT CITY, MD 21042  
 P.(410) 964 1181 F. (410) 997 2924 www.dwtaylor.com

BID & PERMIT ONLY

REVISIONS	
date	remarks

Drawn by: ATH checked by: TOM 10/20/14  
 Scale: 1/4" = 1'-0" date: 10/20/14

PROJECT TITLE  
**GOODIER BUILDERS  
 GUPTA RESIDENCE**

CONTENT  
**SECOND FLOOR PLAN**

PROJECT NUMBER	DRAWING NUMBER
2451	A4.1



10230 New Hampshire Avenue  
Suite 350  
Silver Spring, Maryland 20903



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