



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.: B16001153

Building Address: 13533 Paternal Gift Drive
 City: Highland State: MD Zip Code: 20777
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Paternal Gift
 Section: _____ Area: _____ Lot: 8
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: 48,928 SF

Property Owner's Name: William and Juliane Farmer
 Address: 13533 Paternal Gift Drive
 City: Highland State: MD Zip Code: 20777
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Existing Use: SFD
 Proposed Use: SFD w/ Addition
 Estimated Construction Cost: \$ 500,000
 Description of Work: Addition and renovation New Garage

Contractor Company: Wivell Homes, LLC
 Contact Person: Andrew Wivell
 Address: 10025 Four Points Road
 City: Rocky Ridge State: MD Zip Code: 21778
 License No.: M.H.I.C. 127580
 Phone: 301-748-5344 Fax: _____
 Email: andrew@wivellhomes.com

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

Engineer/Architect Company: A.F. McCormick Structural Engineering
 Responsible Design Prof.: Alicia McCormick
 Address: P.O. Box 3604
 City: Shepherdstown State: WV Zip Code: 25443
 Phone: 304-876-1661 Fax: _____
 Email: alicia.mccormick@gmail.com

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>17' x 40'</u>
Area of construction (sq. ft.): _____	2 nd floor: <u>17' x 40'</u>
Use group: _____	Basement: <u>n/a</u>
Construction type: _____	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input checked="" type="checkbox"/> Crawl Space
<input checked="" type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input checked="" type="checkbox"/> Wood Frame	No. of Bedrooms: <u>2</u>
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Multi-family Dwelling
	No. of efficiency units: _____
	No. of 1 BR units: _____
	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
<u>n/a</u>	<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 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 checked="" type="checkbox"/> No	
Grading Permit Number: <u>n/a</u>	
Building Shell Permit Number: RECEIVED	

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: Andrew P. Wivell Print Name: Andrew P. Wivell
 Email Address: andrew@wivellhomes.com Date: 3-16-16
 Title/Company: Owner / Wivell Homes

← Same

See Reverse

RECEIVED

MAR 16 2016

LICENSES & PERMITS DIVISION

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

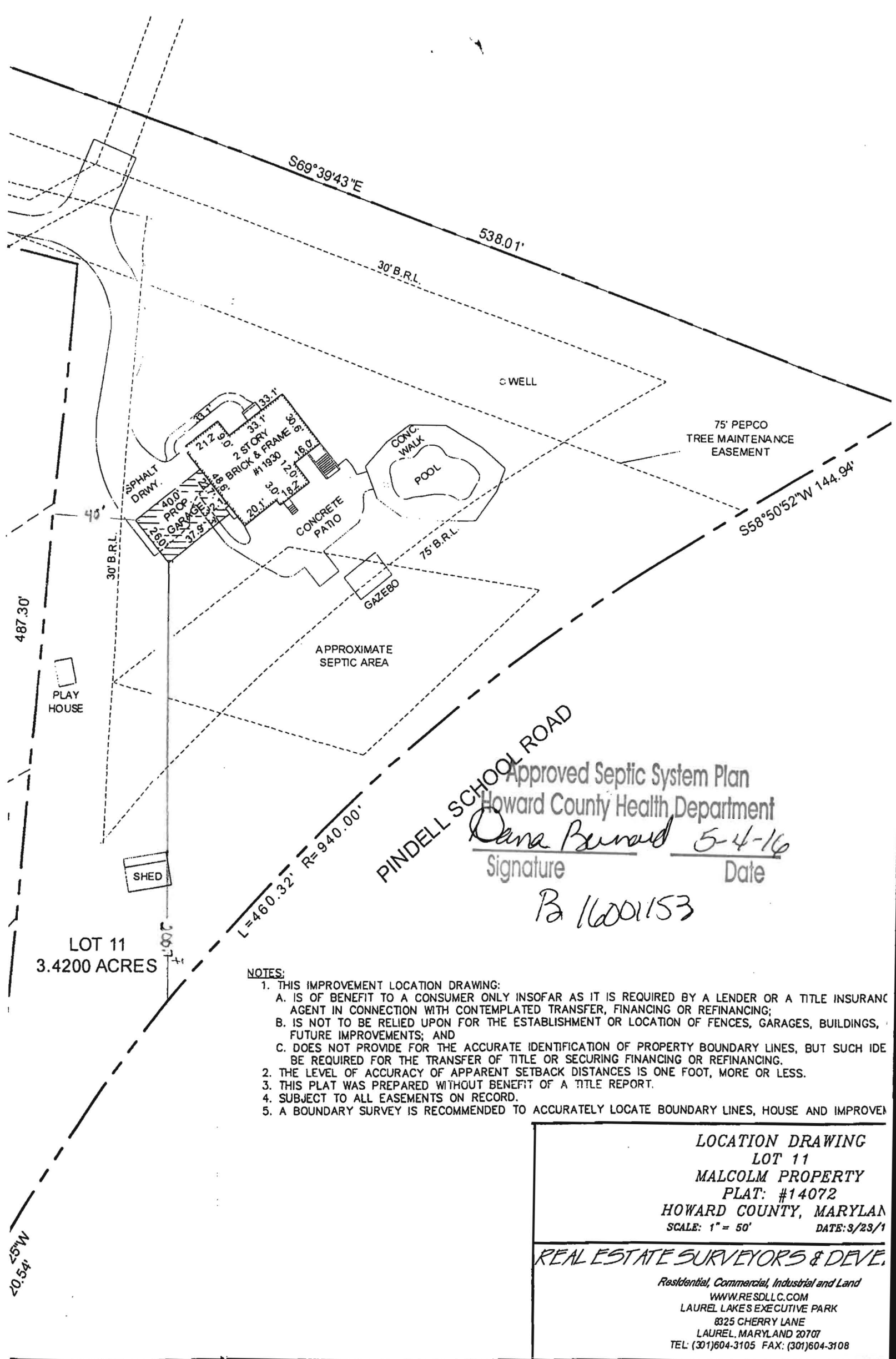
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		<u>Dana Burns</u>

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>25.00</u>
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



Approved Septic System Plan
 Howard County Health Department
Dana Bernard 5-4-16
 Signature Date
 B 16001153

- NOTES:**
- THIS IMPROVEMENT LOCATION DRAWING:
 - IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING;
 - IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, FUTURE IMPROVEMENTS; AND
 - DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.
 - THE LEVEL OF ACCURACY OF APPARENT SETBACK DISTANCES IS ONE FOOT, MORE OR LESS.
 - THIS PLAT WAS PREPARED WITHOUT BENEFIT OF A TITLE REPORT.
 - SUBJECT TO ALL EASEMENTS ON RECORD.
 - A BOUNDARY SURVEY IS RECOMMENDED TO ACCURATELY LOCATE BOUNDARY LINES, HOUSE AND IMPROVEMENTS.

LOCATION DRAWING
 LOT 11
 MALCOLM PROPERTY
 PLAT: #14072
 HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' DATE: 3/23/16

REAL ESTATE SURVEYORS & DEVELOPERS

Residential, Commercial, Industrial and Land
 WWW.RESDLLC.COM
 LAUREL LAKES EXECUTIVE PARK
 8325 CHERRY LANE
 LAUREL, MARYLAND 20707
 TEL: (301)604-3105 FAX: (301)604-3108

Bernard, Dana


From: Bernard, Dana
Sent: Friday, April 29, 2016 3:00 PM
To: andrew@wivellhomes.com
Subject: FW: 13533 Paternal Gift Drive

From: Bernard, Dana
Sent: Friday, April 29, 2016 2:44 PM
To: 'candrew@wivellhomes.com'
Subject: 13533 Paternal Gift Drive

Mr. Wivell,

I see that you have shown the first floor and the second floor on your plans, however I do not see the floor plan for the basement. Also, the number of bedrooms for the house must be listed on your application. The number that is shown is 0. I have included a screen shot of the information listed on your application.

RESIDENTIAL PERMIT INFORMATION

Capital Project-No Fee * Yes No	Capital Project Number	Fee Exempt * Yes No	Roadside Tree Project Permit Yes No	Roa	
Change In Use Yes No	Existing Use	1st Floor Depth FT	1st Floor Width FT	2nd Floor Depth FT	2nd Floor FT
Basement Width FT	Height FT	Total Square Footage * SQFT	Occupiable Square Footage * SQFT	Bedrooms *	Full Bat
Foundation	Basement	Other Structure	W & S Fees Paid Yes No	Water	
Sewage	Utilities	Heating System	Sprinkler System	Type of Fireplace	
No of Fireplaces	Grading Permit No	Expiration Date 			

Thank you & Have a*""
 ,.,.,,*""),.,,*""
 (.,. (.,.* Wonderful Day !

Dana Bernard, R.E.H.S./L.E.H.S.
 Environmental Specialist II
 Bureau of Environmental Health
 Well and Septic Program
 Phone (410) 313-2775
 E-mail: DBernard@howardcountymd.gov


Bernard, Dana

From: Bernard, Dana
Sent: Monday, May 02, 2016 10:42 AM
To: 'Andrew Wivell'
Subject: RE: 13533 Paternal Gift Drive
Attachments: image001.png; image002.gif

Mr. Wivell,

I do have the information regarding your upgrade in 2015. However, I see that you have shown the first floor and the second floor on your plans and I do not see the floor plan for the basement or the addition. All information must be submitted to review the application. Also, the number of bedrooms for the house must be listed on your application. The number that is shown on your application is 0. I have included a screen shot of the information listed on your application.

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Thank you & Have a*[^])
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 (.,. (.,.* Wonderful Day !

Dana Bernard, R.E.H.S/L.E.H.S.
 Environmental Specialist II
 Bureau of Environmental Health
 Well and Septic Program
 Phone (410) 313-2775
 E-mail: DBernard@howardcountymd.gov

From: Andrew Wivell [mailto:andrew@wivellhomes.com]
Sent: Friday, April 29, 2016 6:54 PM
To: Bernard, Dana
Subject: RE: 13533 Paternal Gift Drive

Hi Dana,

There are 6 bedrooms total: 4 existing and 2 New (above the existing Garage). This is the same information that you used when you and Robert did your calculations in December. The Septic has been upgraded accordingly.

What, if anything, do you formally need me to do?

Andrew Wivell, Owner
301-748-5344



From: Bernard, Dana [mailto:dbernard@howardcountymd.gov]
Sent: Friday, April 29, 2016 3:00 PM
To: andrew@wivellhomes.com
Subject: FW: 13533 Paternal Gift Drive

From: Bernard, Dana
Sent: Friday, April 29, 2016 2:44 PM
To: 'candrew@wivellhomes.com'
Subject: 13533 Paternal Gift Drive

Mr. Wivell,

I see that you have shown the first floor and the second floor on your plans, however I do not see the floor plan for the basement. Also, the number of bedrooms for the house must be listed on your application. The number that is shown is 0. I have included a screen shot of the information listed on your application.

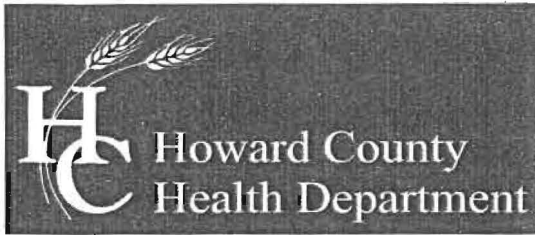
RESIDENTIAL PERMIT INFORMATION

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Change In Use Yes No	Existing Use	1st Floor Depth FT	1st Floor Width FT	2nd Floor Depth FT	2nd Floor FT
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Sewage	Utilities	Heating System	Sprinkler System	Type of Fireplace	
No of Fireplaces	Grading Permit No	Expiration Date			

Thank you & Have a*
 Wonderful Day !

Dana Bernard R E H S/ E H S

Environmental Specialist II
Bureau of Environmental Health
Well and Septic Program
Phone (410) 313-2775
E-mail: DBernard@howardcountymd.gov



Office of the Health Officer

8930 Stanford Drive, MD 21045

Main: 410-313-6300 | Fax: 410-313-6303

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

DATE: April 12, 2016

TO: Andrew Wivell
Wivell Homes, LLC
Via E-mail: candrew@wivellhomes.com

RE: **Building Permit # B14001153**
13533 Paternal Gift Drive
Highland, Maryland 20777

Mr. Wivell,

Further review is contingent upon submission of a revised building plan showing the following:

- Floor plans for the existing house and the proposed addition must be submitted to determine the number of bedrooms used. If it is determined that number of bedrooms cannot accommodate your proposed plan, you will be required to upgrade your system.
- I have included a copy of the BAT plan requirements to help submit your BAT plan if needed.

Your building permit will be placed "on hold" until all Health Department requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,

Dana Bernard, REHS/RS
Environmental Specialist II
Bureau of Environmental Health
Well and Septic Program
Phone (410) 313-2775
E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file

