

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:

B15005251

Building Address: 18335 Chelsea Knolls Drive  
Mt. Airy MD 21771  
Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: F-07-072  
Census Tract: \_\_\_\_\_ Subdivision: Chelsea Knolls  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 5  
Tax Map: 12 Parcel: 78 Grid: 5  
Zoning: RC-DEO Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: Vacant Lot  
Proposed Use: New - Single Family  
Estimated Construction Cost: \$250,000  
Description of Work: Model Corsica  
2 story full basement  
10R, 2FB, 1HB and 2 Garage (4 bdrm) w/  
optional fireplace and Deck

Occupant or Tenant: Ryan Homes  
Was tenant space previously occupied? ☐ Yes ☒ No  
Contact Name: Daren Snyder  
Address: 9720 Patuxent Woods Drive  
City: Columbia State: MD Zip Code: 21046  
Phone: 410.796.0980 Fax: \_\_\_\_\_  
Email: dsnyder@nvrinc.com

Property Owner's Name: Ryan Homes  
Address: 9720 Patuxent Woods Drive  
City: Columbia State: MD Zip Code: 21046  
Home Phone: \_\_\_\_\_ Work Phone: 410.796.0980  
Applicant's Name & Mailing Address (if other, than stated herein): \_\_\_\_\_

Phone: \_\_\_\_\_ DEC 03 2015 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

LICENSES & PERMITS

DIVISION  
Contractor Company: Ryan Homes  
Contact Person: Daren Snyder  
Address: 9720 Patuxent Woods Drive  
City: Columbia State: MD Zip Code: 21046  
License No.: 56  
Phone: 410.796.0980 Fax: 410.796.7094  
Email: dsnyder@nvrinc.com

Engineer/Architect Company: Fisher, Collins, & Carter  
Responsible Design Prof.: Stephanie Tuite  
Address: 10272 Baltimore National Pike  
City: Ellicott City State: MD Zip Code: 21042  
Phone: 410.461.2855 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
	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
Use group: _____	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
	<u>Heating System</u>
Construction type: _____	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Structural Steel	
<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
<u>Roadside Tree Project Permit</u>	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit#</u>	No. of Heads: _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 <sup>st</sup> floor: 40 54	<input checked="" type="checkbox"/> Private
2 <sup>nd</sup> floor: 40 54	<u>Sewage Disposal</u>
Basement: 40 54	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input checked="" type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms: 4	<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: _____	<u>Roadside Tree Project Permit</u>
Roof: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit#</u>
<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

dsnyder@nvrinc.com

Email Address

Cost Manager

Title/Company

Daren Snyder

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
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health	2/4/2016	R. Snyder
<input checked="" type="checkbox"/> Fire Protection		
Is Sediment Control approval required for issuance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START		
<input type="checkbox"/> ONE STOP SHOP		

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	\$ 100.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$

CK# 879292/93

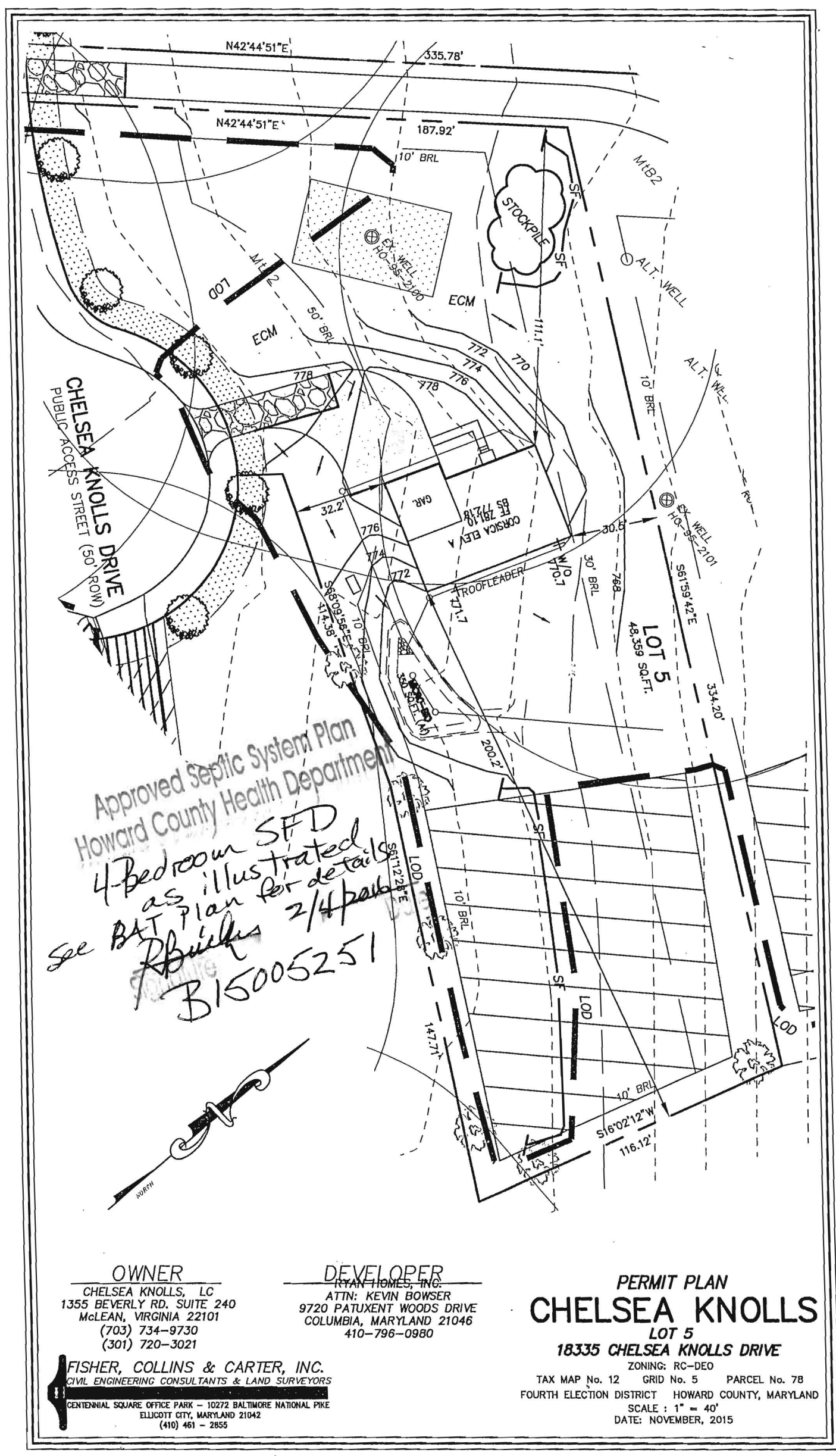
Approved Septic System Plan  
 Howard County Health Department  
 4-Bedroom SFD  
 as illustrated  
 see BAT plan for details  
 RBuckles 2/4/2016  
 B15005251

**OWNER**  
 CHELSEA KNOLLS, LC  
 1355 BEVERLY RD. SUITE 240  
 McLEAN, VIRGINIA 22101  
 (703) 734-9730  
 (301) 720-3021

**DEVELOPER**  
 RYAN HOMES, INC.  
 ATTN: KEVIN BOWSER  
 9720 PATUXENT WOODS DRIVE  
 COLUMBIA, MARYLAND 21046  
 410-796-0980

**FISHER, COLLINS & CARTER, INC.**  
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
 CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
 ELLICOTT CITY, MARYLAND 21042  
 (410) 461 - 2855

**PERMIT PLAN**  
**CHELSEA KNOLLS**  
**LOT 5**  
**18335 CHELSEA KNOLLS DRIVE**  
 ZONING: RC-DEO  
 TAX MAP No. 12 GRID No. 5 PARCEL No. 78  
 FOURTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
 SCALE: 1" = 40'  
 DATE: NOVEMBER, 2015





# Building Perm 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.: B16000818

Building Address: 18735 Chelsea Knolls Dr  
City: AIT State: MD Zip Code: 21771  
Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: Chelsea Knolls  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 5  
Tax Map: 12 Parcel: 78 Grid: 5  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 1.110

Existing Use: SED  
Proposed Use: SDP w/ Proposed Trunk  
Estimated Construction Cost: \$ 8000

Description of Work: install 1000 gallon underground  
propane tank

Occupant or Tenant: \_\_\_\_\_

Was tenant space previously occupied? ☐ Yes ☐ No

Contact Name: \_\_\_\_\_

Address: Owner

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:	<b>Depth</b> <b>Width</b>
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:
	2 <sup>nd</sup> floor:
Area of construction (sq. ft.):	Basement:
	<input type="checkbox"/> Finished Basement
Use group:	<input 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:
<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 type="checkbox"/> No	Roof:
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: Chelsea Knolls LLC  
Address: 1355 Beverly Rd STE 200  
City: Beltsville State: MD Zip Code: 20814  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**Applicant's Name & Mailing Address, (If other than stated herein)**  
Applicant's Name: Jerome L. Jones  
Address: PO Box 310  
City: Dan, MD State: MD Zip Code: 21028  
Phone: 410-310-1229 Fax: \_\_\_\_\_  
Email: Jerome@AppliedAndApproved.com

Contractor Company: TECH ALL  
Contact Person: Devin Feag  
Address: 1560 A-D College Center Dr  
City: Baltimore State: MD Zip Code: 21207  
License No.: 81215  
Phone: 410-545-1313 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Engineer/Architect Company: \_\_\_\_\_

Responsible Design Prof.: \_\_\_\_\_

Address: Cottrell

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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

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: Jerome L. Jones

Email Address: Jerome@AppliedAndApproved.com

Title/Company: \_\_\_\_\_

Print Name: Jerome L. Jones

Date: 3/1/16

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>3/1/16</u>	<u>[Signature]</u>

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

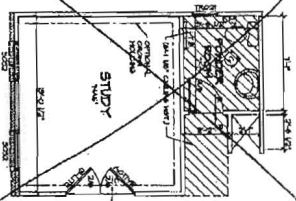
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot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

Filing Fee	\$ <u>100.00</u>
Permit Fee	\$
Tech Fee	\$ <u>10.00</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ <u>110.00</u>
Sub-Total Paid	\$ <u>110.00</u>
Balance Due	\$
Check	# <u>5142</u>

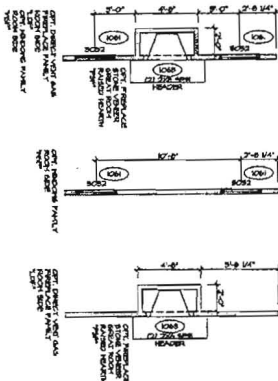
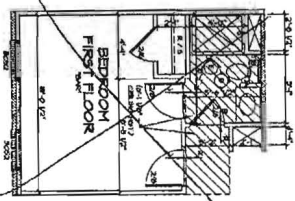




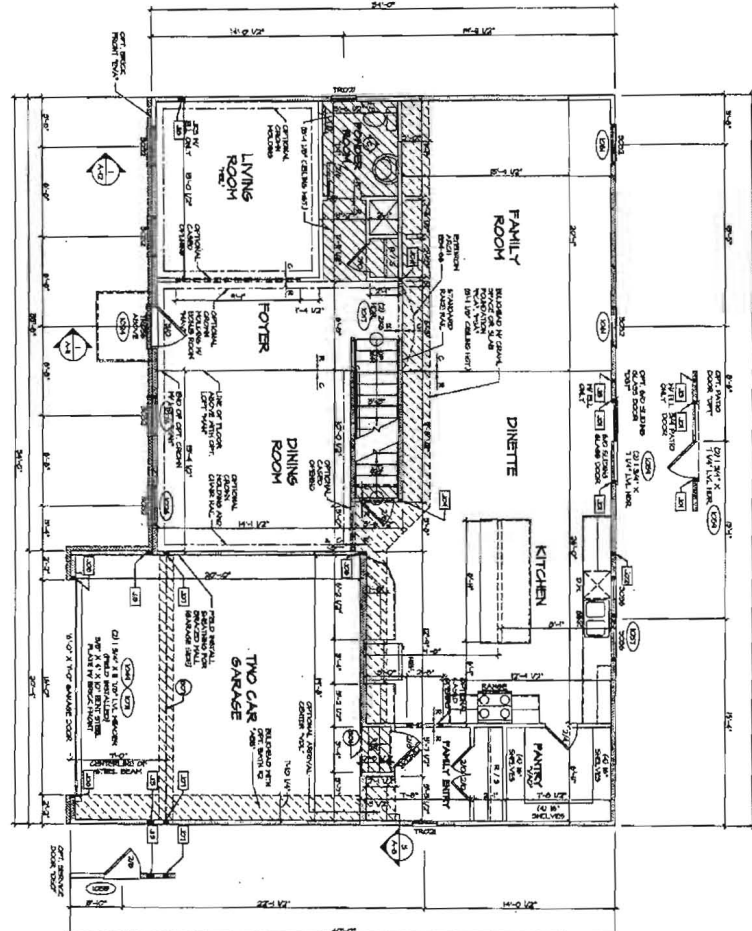
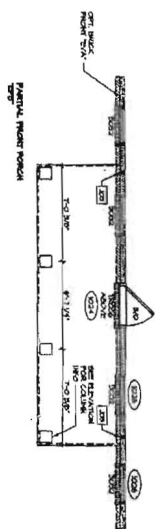
1 PARTIAL FIRST FLOOR PLAN  
SCALE 1/4" = 1'-0"



2 PARTIAL FIRST FLOOR PLAN  
SCALE 1/4" = 1'-0"

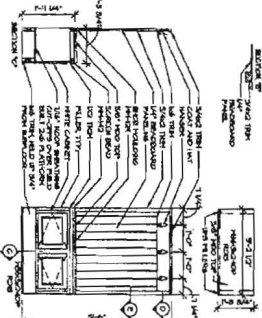


1 FIRST FLOOR PLAN  
SCALE 1/4" = 1'-0"

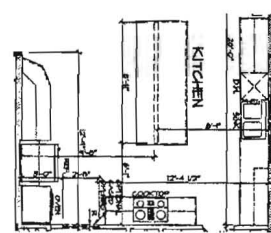


- NOTES**
1. GENERAL NOTES (N-1)
  2. LVL. NAILING SCHEDULE (N-1)
  3. SCHEDULES (N-2)
- LEGEND**
- 1. FINISH FLOOR
  - 2. FINISH WALL
  - 3. FINISH CEILING
  - 4. FINISH DOOR
  - 5. FINISH WINDOW
  - 6. FINISH STAIR
  - 7. FINISH PORCH
  - 8. FINISH DRIVEWAY
  - 9. FINISH PATIO
  - 10. FINISH TERRACE
  - 11. FINISH BALCONY
  - 12. FINISH PORCH
  - 13. FINISH DRIVEWAY
  - 14. FINISH PATIO
  - 15. FINISH TERRACE
  - 16. FINISH BALCONY

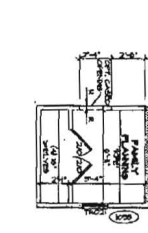
4 ARRIVAL CENTER DETAIL  
SCALE 1/2" = 1'-0"



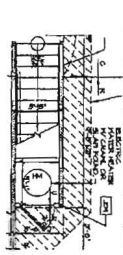
5 PARTIAL FIRST FLOOR PLAN  
SCALE 1/4" = 1'-0"



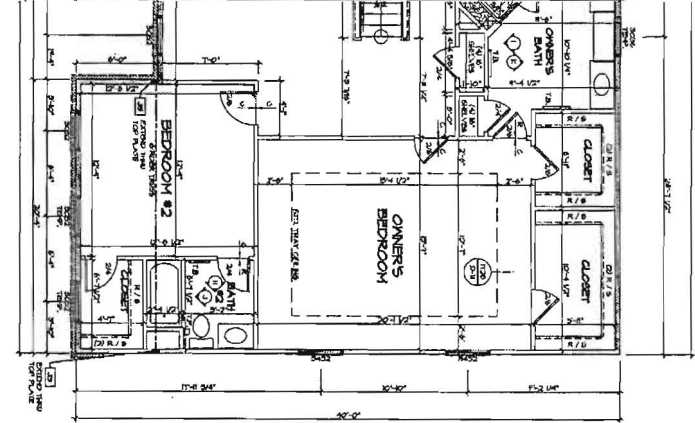
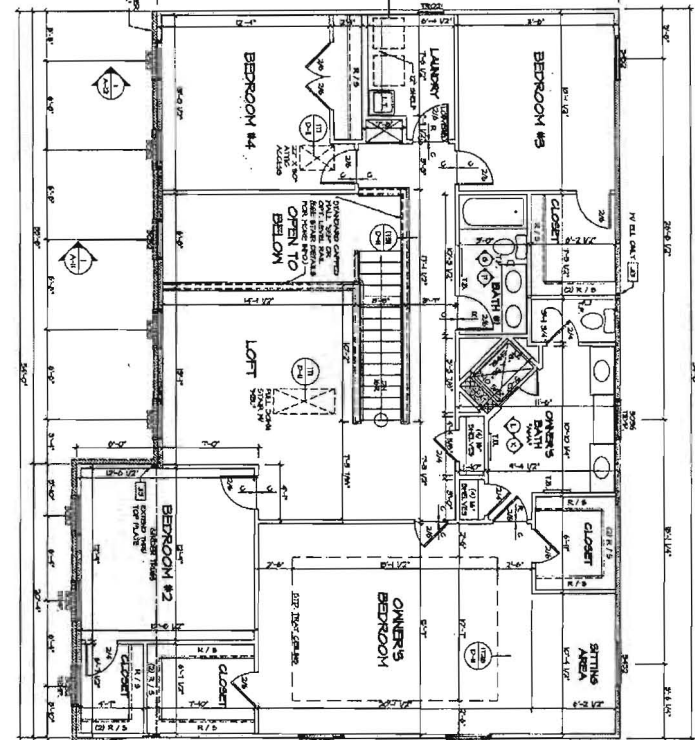
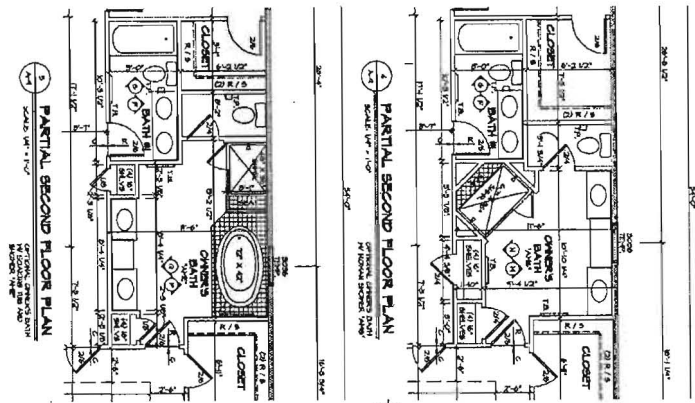
6 PARTIAL FIRST FLOOR PLAN  
SCALE 1/4" = 1'-0"



7 PARTIAL FIRST FLOOR PLAN  
SCALE 1/4" = 1'-0"



SHEET NO. <b>A-8</b>	MODEL <b>CORSICA</b>	SET NO. CORRIDOR VERSION 01 DRAWN BY TGS DATE 10/15/14 OPTION	<b>NVR</b> 21 Bldg. Corp., Suite A Frederick, MD 21702	REVISIONS 1. 10/15/14 - CORRIDOR VERSION 01
-------------------------	-------------------------	---	--	--



SHEET NO. <b>A-9</b>	MODEL <b>CORSICA</b>	LET NO. CORROD VERSION 01	 NVR, INC. 11 3rd Street, Suite A Franklin, MA 01717	REV. NO. DATE	REVISIONS
	DRAWING TITLE <b>SECOND FLOOR PLAN</b>	DRAWN BY <b>BAH</b>		DATE <b>8/24/14</b>	1 8/20/14 BAH - CREATING VENDOR SET 2 8/20/14 BAH - SPOKESMAN FOR BAH SET
OFFICE DESCRIPTION <b>41</b>		OFFICE 			