

Building Permit Application
Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455

Permit No.: \_\_\_\_\_

Date Received: \_\_\_\_\_

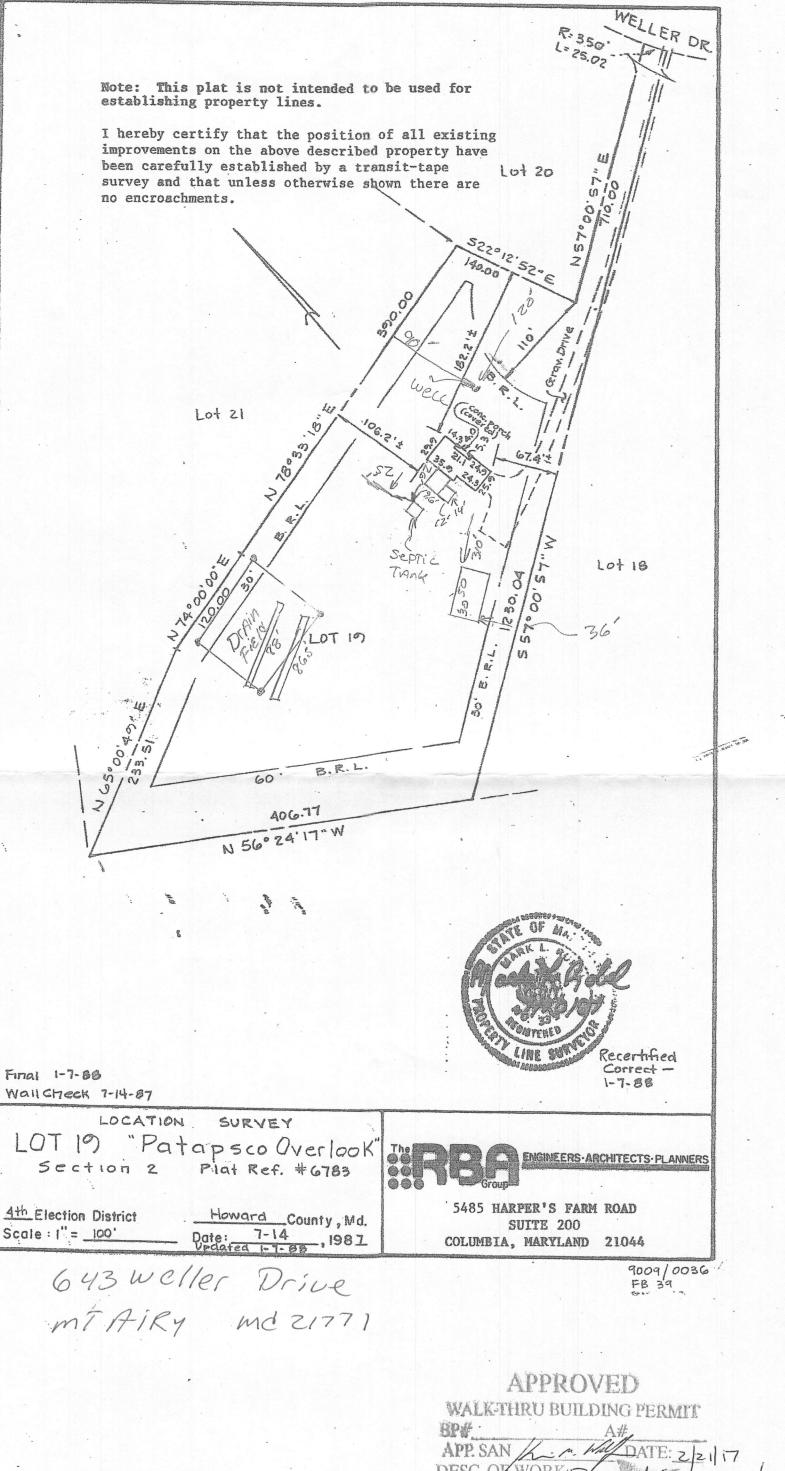
www.howardcountymd.gov

Existing Use:			
State   Mod   Jap Code   Z7771   State   Jap Code   Jap Code   Z7771   State   Jap Code   Z7771   State   Jap Code   Z7771   State   Jap Code   Z7771   State   Jap Code   Z7771   St	Building Address: 643006	Mer Drive	Property Owner's Name: Edin APd Grim
Solety Apr. 8 Spp/NP/PA 4:  Subdivision: PATHEC CUCLOS Section: Area:  Lot. Tak Map: Parcel: Grid. Zoning: Map Coordinates: Lot Size: 3.544  Fasting Use: 4/RM ROOM HUSSE Proposed Use: SLA ROOM SCREWARD POCCH  Estimated Construction Cost: 5 LPL COC  Description of Work: Black Found House  Final: Contract Name Mailing Address, (if other than stated herein Applicant's Name: Address:  Contact Name: Applicant's Name: Address: Contact Person.  Final: Contract Person.  Contact Name: Address: LPL COC Contract Name: LPL COC K 19.8  Proc. 1 LPL COC K 19.8  Proc. 1 LPL COC K 19.8  Contact Name: Address: LPL COC Contract Name: LPL COC K 19.8  Mas renant space previously occupied? DNG INO  Contact Name: Fac: Proc. LPL COC K 19.8  Address: LPL COC COC Contract Name: LPL COC COCK COCK COCK COCK COCK COCK COCK	City: MTAIRY State:	Md 7in Code: 21771	Address: 643 Weller Dr.
Section   Area   Subdivision Buttles Customer   Section   Area   Area   Lot   Area   Area   Lot   Area	/		City: MTHRY State: Md Zip Code: 21771
Section: Area: 101: Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Name & Mailing Address, [if other than stated herein Applicant's Name & Mailing Address, [if other than stated herein Applicant's Name & Name			Phone: 470-4872673ax: 410-484-5303
Tan Map:   Parcel:   Grid:   Applicant's Name:   Applicant's Name:			
Zoning: May Coordinates: Lot Size: 3.144  Existing Use: 488 Room House  Proposed Use: 50 R ROOM 3-5(RE) And Pocch  Estimated Construction Cost: 100 ROOM 3-5(RE) And Pocch  Contact Name: 240 ROOM 3-5(RE) And ROOM 3			
Contact Person   Contact Prince   Contact Prince   Contact Person   Cont	Tax Map: Parcel:_	Grid:	Address:
Existing Use: 4/38/L Roum #House Proposed Use: 5UN ROUM & SCIENTED POCCH Estimated Construction Cost: 5	Zoning: Map Coordinat	:es:Lot Size:SAC	. City: State: Zip Code:
Proposed Use: SUR ROOM SCREENED POCCH Estimated Construction Cost: \$ DOLOGO Description of Work: Bleck Food African FLAM BLUE STOCK HOLOGO Description of Work: Bleck Food African FLAM BLUE STOCK HOLOGO Description of Work: Bleck Food African FLAM BLUE STOCK HOLOGO Description of Work: Bleck Food African FLAM BLUE STOCK HOLOGO Description of Work: Bleck Food African FLAM BLUE STOCK HOLOGO Description of Work: Bleck Food African FLAM BLUE STOCK HOLOGO Description of Work: Bleck Food African Flow State Blood Description of Work: Bleck Food African Flow State Blood Description of Work: Bleck Food African Email:  Engineer/Architect Company: Food Food Email: Engineer/Architect Company: Food Food Email: Engineer/Architect Company: Food Food Email: Engineer/Architect Company: Food Food Email: Engineer/Architect Company: Food Food Email: Engineer/Architect Company: Food Food Email: Engineer/Architect Company: Food Food Email: Engineer/Architect Company: Food Food Email: Engineer/Architect Company: Food Food Email: Engineer/Architect Company: Food Food Email: Contractor Company: Contractor Food Email: Engineer/Architect Company: Food Food Email: Engineer/Architect Company: Food Food Email: Contractor Company: Contractor Food Email: Engineer/Architect Company: Food Food Email: Contractor Company: State: Prod. Zip Code City: Clifford Food Email: Engineer/Architect Company: Food Food Email: Local State Engineer/Architect Company: Food Food Email: Local State Engineer/Architect Company: Food Food Email: Local State Engineer/Architect Company: Food Email: Local State Engineer/Architect Company: Food Email: Local State Engineer/Architect Company: Food Engineer/Architect			Phone: Fax:
Estimated Construction Cost: \$	Existing Use: 4 BEd Room	1 HOUSE	Email:
Address:   Z   Z   Z   Z   Z   Z   Z   Z   Z	Proposed Use: 5UN RO	om Ischended Porch	Contractor Company: Charlie Rosway CCC
Description of Work: Block Found History  First Red with U.S. 26 × 19.8  Occupant/Tenant Name: Cliu ARD Cri M  Was tenant space previously occupied? Drés   DNo Contact Name: Address:   Zip Code:   Drés   DNo Contact Name:   Garding France   Project Permit   Pro	Estimated Construction Cost: \$	100,000	
Cocupant/Tenant Name:   Claus All   Gr   Monor Name:   Claus		£ ,	
Occupant/fenant Name: Citus ARCI City  Was tenant space previously occupied? Dress Contact Name: Grant P F S I Bake  Address: City: State: Zip Code: City: Will Zip Code: Zij Zip Code: City: Will Zip Code: Zij Zip			
Coupant/Tenant Name:   Club Acid   Climary   Checks Popular to Difference of Contact Name:   Climary			
Cocupanty   Femant Name:   College   Constant Name:   College   Contact Name:   College   Contact Name:   College   Contact Name:   College   Contact Name:   College   Colleg	Pocch	12×14	NO.
Contact Name: SAME 45 ABJUE  Address: Address: Address: Address: Mock 5 ABJUE  Address: Address: Mock 5 ABJUE  Address: Mock 5 ABJUE  Address: Mock 5 ABJUE  City: Will Missie State: Wild Zip Code: Zil 5 ABJUE  Phone: Fax: Phone: Mock 5 ABJUE  Phone: Mock 5 ABJUE  Commercial Building Characteristics Residential Building Characteristics  Height: 154	Occupant/Tenant Name:	UARD Grim	Email:
Address:  City: State: Zip Code: City: WEST miss Estate: Mod Zip Code: Zit S Phone: Yio State: Mod Zip Code: Zit S Phone: Yio S Mod S Phone: Yio S Mod S Phone: Yio S No Depth Width Gas: No Code:	Was tenant space previously occupied?	. □Yes □No	Engineer/Architect Company: Regine Design
Address:  City: State: Zip Code: City: WEST misses State: Mod Zip Code: Zit ST Phone: Fax: Phone: Mode State: Mod Zip Code: Zit ST Phone: Mode State: Mode Zip Code State: Mode	Contact Name:	AMR AS ABOVE	
City:			. 1
Phone:			
Email:			
Commercial Building Characteristics   Residential Building Characteristics   Height:   Q d   GP Dwelling   SF Townhouse   Depth   Windth   Gas:   Ves   No   Gas:   Ves   Ve	Phone:	Fax:	
Height:   9	Email:		Email: hperfine 47/6 CONCAST: NET
No. of stories: {	Commercial Building Characteristics	Residential Building Characteristics	Utilities
Gross area, sq. ft./floor: \$\frac{1}{2}\frac{1}{6}\text{loor:} \frac{1}{2}\frac{1}{6}\text{loor:} \frac{1}{2}\frac{1}{6}\	Height: 194	□ SF Dwelling    □ SF Townhouse	Electric: 🖫 Yes 🗆 No
Area of construction (sq. ft.): 75'   Basement			Gas:
Area of construction (sq. ft.): 757   Basement: //	Gross area, sq. ft./floor: 57/0	1 <sup>st</sup> floor: 26 19'6"	Water Supply
Sewage Disposal   Private   Privat	n c , , , , , , , , , , , , , , , , , ,	, and a second s	☐ Public
Sewage Disposal   Public	Area of construction (sq. ft.): 757	basement.	
Construction type:	llse group:		
Construction type:	Ose Broup.	The second secon	
Reinforced Concrete	Construction type:		Address to Supplementation
Structural Steel   Multi-family Dwelling		No. of Bedrooms:	
No. of 1 BR units:   No. of 3 BR units:   No. of 3 BR units:   Other Structure:   Other Structure:   Other Structure:   Yes   Mo   Propane Gas   Propane Gas   Other:   Sprinkler System:   Other:   Yes   Mo   Propane Gas   Pr	☐ Structural Steel	Multi-family Dwelling	
State Certified Modular    State Certified Modular   No. of 2 BR units:   Other:		No. of efficiency units:	
No. of 3 BR units:  Other Structure:  Dimensions:  → Roadside Tree Project Permit Footings:  Roadside Tree Project Permit # State Certified Modular  Roadside Tree Project Permit # 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 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 DE 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  Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  **PLEASE WRITE NEATLY & LEGIBLY**			
Other Structure:  Dimensions:  → Roadside Tree Project Permit Footings:  Grading Permit Number:  Grading Permit Number:  Grading 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 PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DE 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  Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  **PLEASE WRITE NEATLY & LEGIBLY**	☐ State Certified Modular		
Dimensions:    Yes   Mo   Roof:		7/5	
Roadside Tree Project Permit Footings:    Yes		A SERVICE NOON TON THE	☐ Yes ☐ No
Grading Permit Number:	N. Daviddor and Co. S. C.		
Roadside Tree Project Permit # State Certified Modular    Manufactured Home   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 Perform No Work on the Above Referenced Property Not Specifically De 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			Grading Permit Number:
Manufactured Home    Building Shell Permit Number:			<del> </del>
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 REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DE 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	Moduside Tree Project Permit #		Building Shell Permit Number:
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 DE 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  Title/Company  Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  **PLEASE WRITE NEATLY & LEGIBLY**			Sulfating officer of the real features.
Title/Company  Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  **PLEASE WRITE NEATLY & LEGIBLY**	WITH ALL REGULATIONS OF HOWARD COUNTY W THIS APPLICATION; (5) THAT HE/SHE GRANTS COU	WHICH ARE APPLICABLE THERETO; (4) THAT HE SHE W JNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROF	VILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN PERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.
Title/Company  Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  **PLEASE WRITE NEATLY & LEGIBLY**	Applicant's Signature	Pr	rint Name
Title/Company  Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  **PLEASE WRITE NEATLY & LEGIBLY**	Pinail Address	<del></del>	ata
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  **PLEASE WRITE NEATLY & LEGIBLY**	email Adaress	Di	utc
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  **PLEASE WRITE NEATLY & LEGIBLY**	Title/Company	<del></del>	
**PLEASE WRITE NEATLY & LEGIBLY**		Checks Payable to: DIRECTOR OF	FINANCE OF HOWARD COUNTY
-FOR OFFICE USE ONLY-		**PLEASE WRITE NE.	ATLY & LEGIBLY**

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		,
PSZA ( Engineering )		
Health	2/21/17	the me wall
Is Sediment Control appr	roval require	for issuance?   Yes No
☐ CONTINGENCY CONST		

DPZ SETBACK INFORMATION		
Front:		
Rear:		
Side:		
Side St.:		
All minimum setbacks met?	☐ Yes	□No
Is Entrance Permit Required?	☐ Yes	□No
Historic District?	☐ Yes	□No
Lot Coverage for New Town Z	one:	
SDP/Red-line approval date:		

Filing Fee	\$	
Permit Fee	\$	
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	- 6
Guaranty Fund	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub- Total Paid	\$	
Balance Due	\$	
Check	#	



DESC. OF WORK: Proposed Son to - w/

Foundation. Equinaket plu or' No Buton and Add Hor, come

made cure of oge of suptres

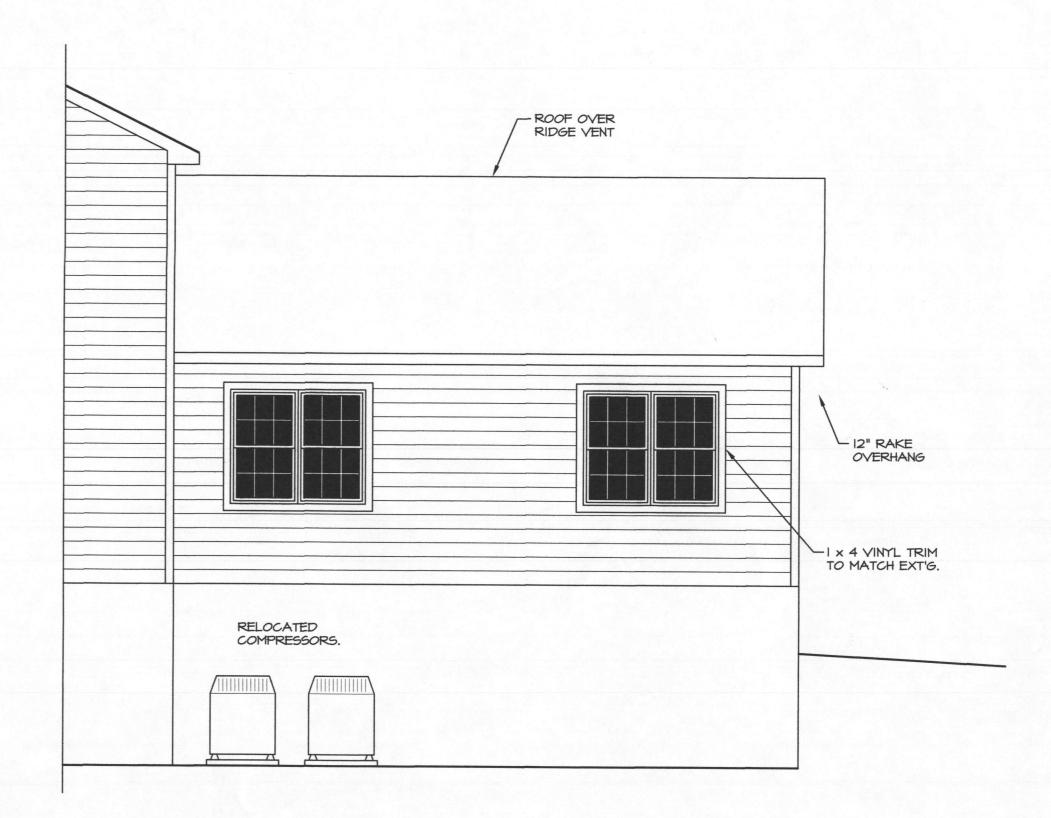
## NOTES:

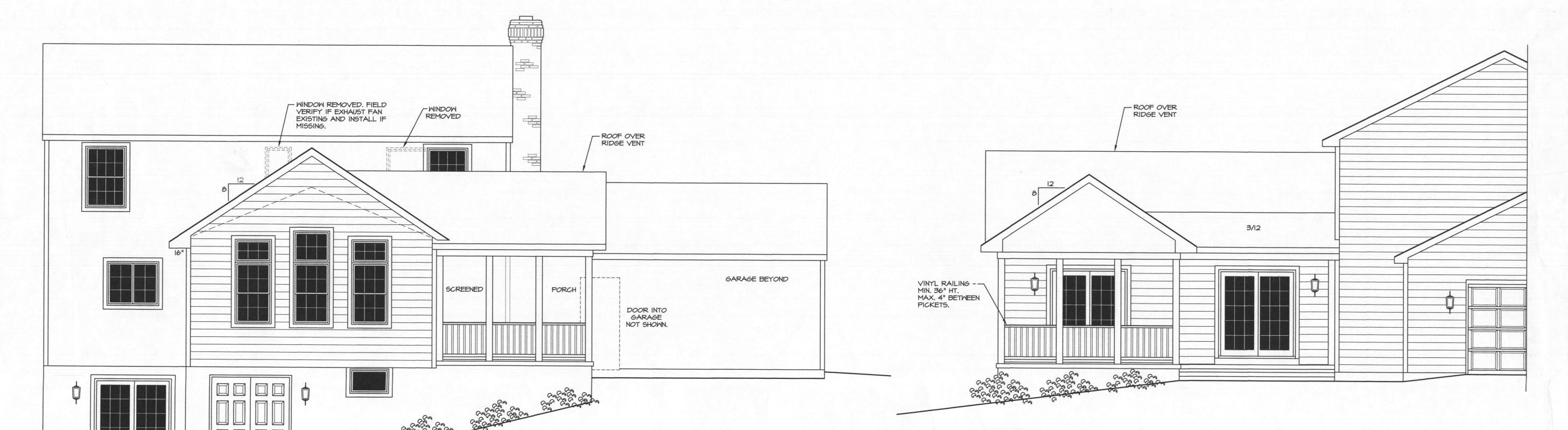
I. PROVIDE GUTTERS, DOWNSPOUTS AND SPLASHBLOCKS.

2. GRADE LINES SHOWN ON DRAWING ARE AN APPROXIMATION OF ACTUAL MEASUREMENTS. FINAL GRADE TO BE DETERMINED AT COMPLETION OF PROJECT AND SUBJECT TO LOCAL CODES AND DRAINAGE PRACTICES.

3. CONTRACTOR TO FIELD VERIFY ALL DIMENSIONS.

		- 1	RESIDENTIAL C	CONSTRUCTION DESIG	N PARAMETER	RS - HOW	ARD COUNTY, MD	IRC 2015			
GROUND SNOW	WIND SPEED	SEISMIC DESIGN	SUB	ECT TO DAMAGE FR	OM	WINTER	ICE SHIELD	FLOOD	AIR	MEAN	RADON
LOAD	JI LLD	CATEGORY	WEATHERING	FROST LINE DEPTH	TERMITE	TEMP.	UNDERLAYMENT REQUIRED	HAZARDS	INDEX	TEMP.	PROTECTION REQUIRED
25 PSF	II5 MPH	A	SEVÈRE	30 INCHES	MODERATE TO HEAVY	20° F	YES	SEE FLOOD MAPS	1,500	55° F	YES





END WALL ELEVATION

SCALE: 1/4" = 1'-0"

RIGHT ELEVATION

SCALE: 1/4" = 1'-0"

GRIM REMODEL

ESIGN West

SHEET

SCALE

1/4" = 1'-0:

DRAWN BY:

DATE

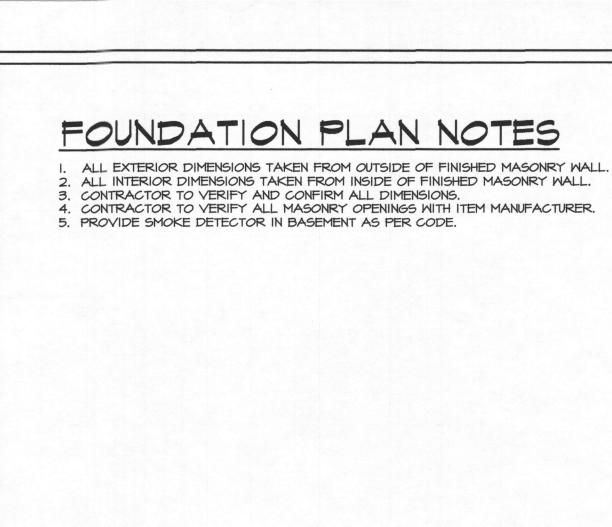
6-26-16

CADFILE GRIM-CON2

of 5

CONSTRUCTION -1
DECEMBER 28, 2016

OR DETAIL NUMBER - SHEET NUMBER



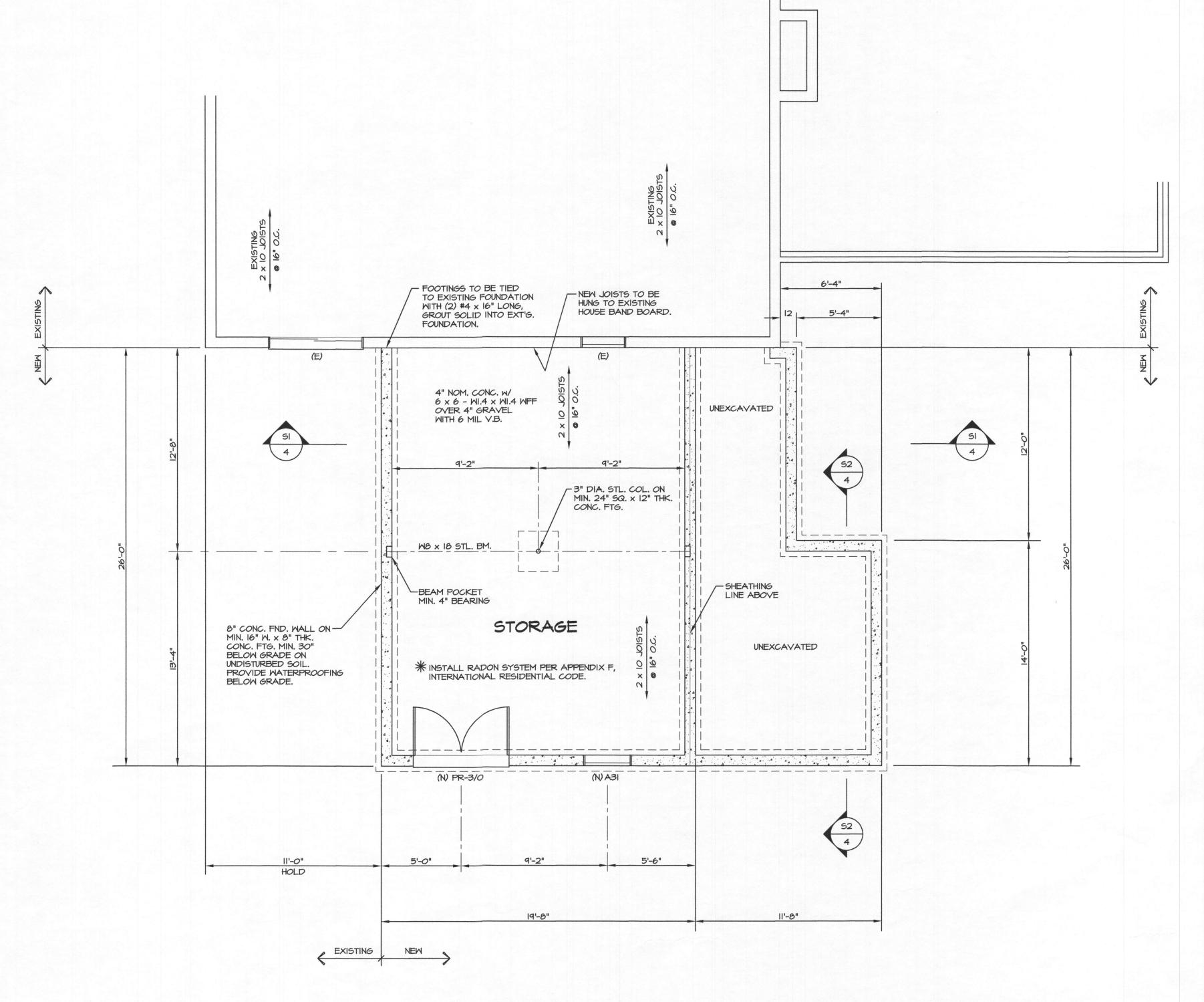
ITEM LEGEND

(E) EXISTING ITEM TO REMAIN
(N) NEW ITEM
(R) RELOCATE EXISTING ITEM
(RN) REPLACE WITH NEW ITEM.

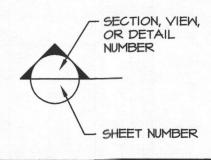
### WALL LEGEND

DENOTES NEW CONCRETE FOUNDATION WALL

DENOTES EXISTING CONC. FND. UNLESS NOTED.



FOUNDATION PLAN
NEW CONSTRUCTION
SCALE: 1/4" = 1'-0"



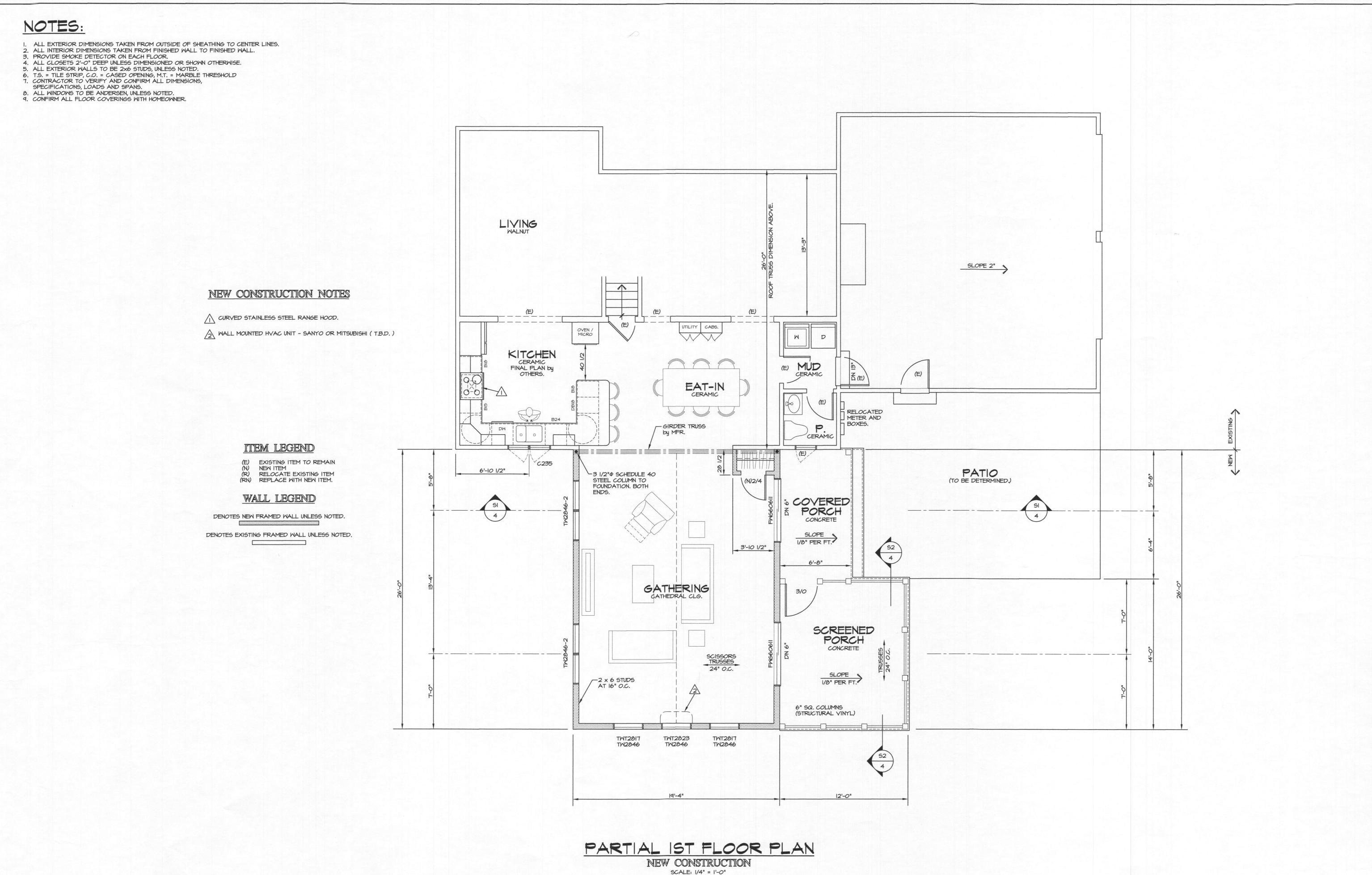
GRIM REMODEL
CONSTRUCTION -1
DECEMBER 28, 2016

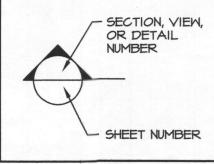
RESIDENCE

RESIDENCE

GRIM RES

ESIGN West





GRIM REMODEL CONSTRUCTION -1 DECEMBER 28, 2016

SHEET 3 of 5

SCALE 1/4" = 1'-0:

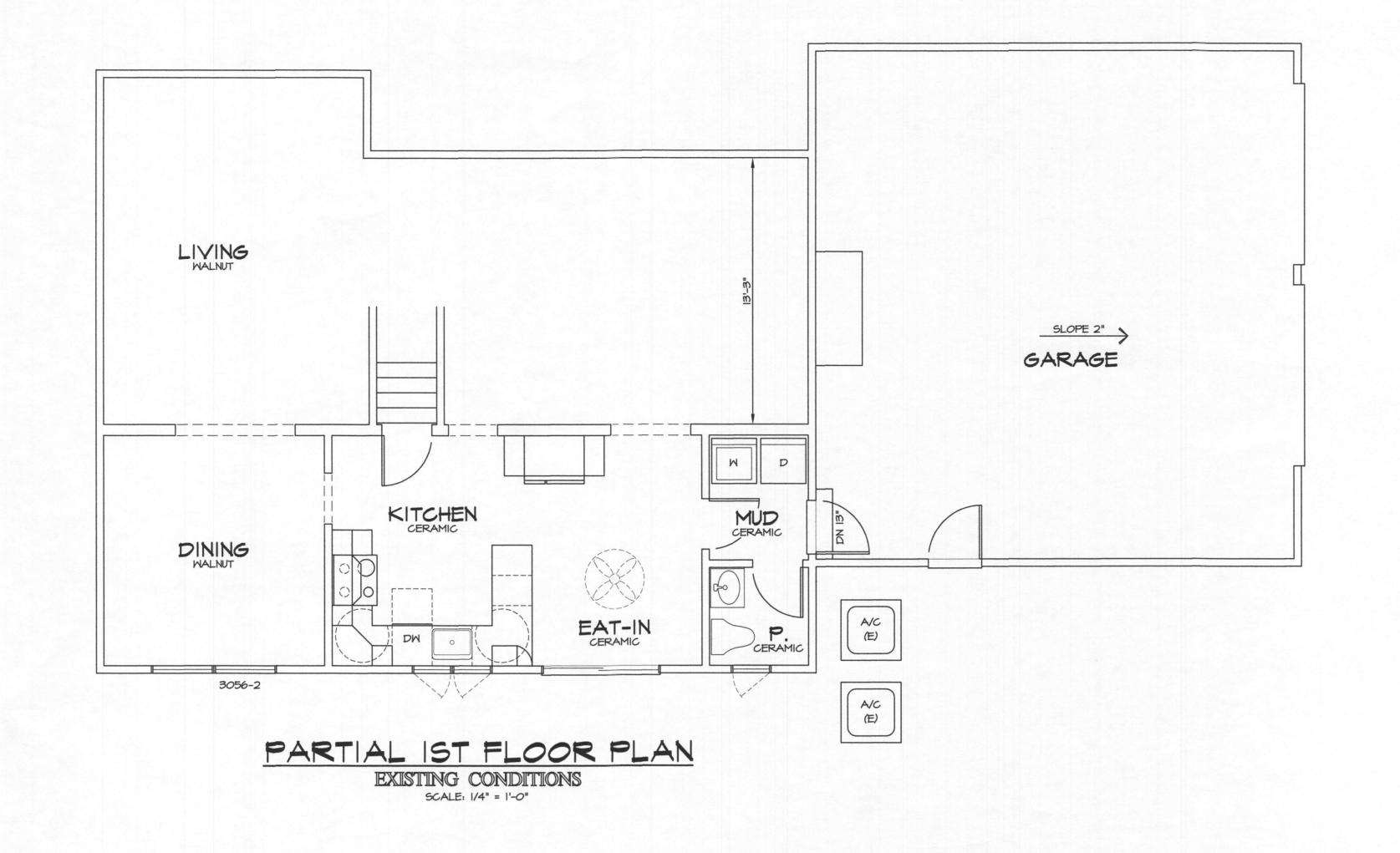
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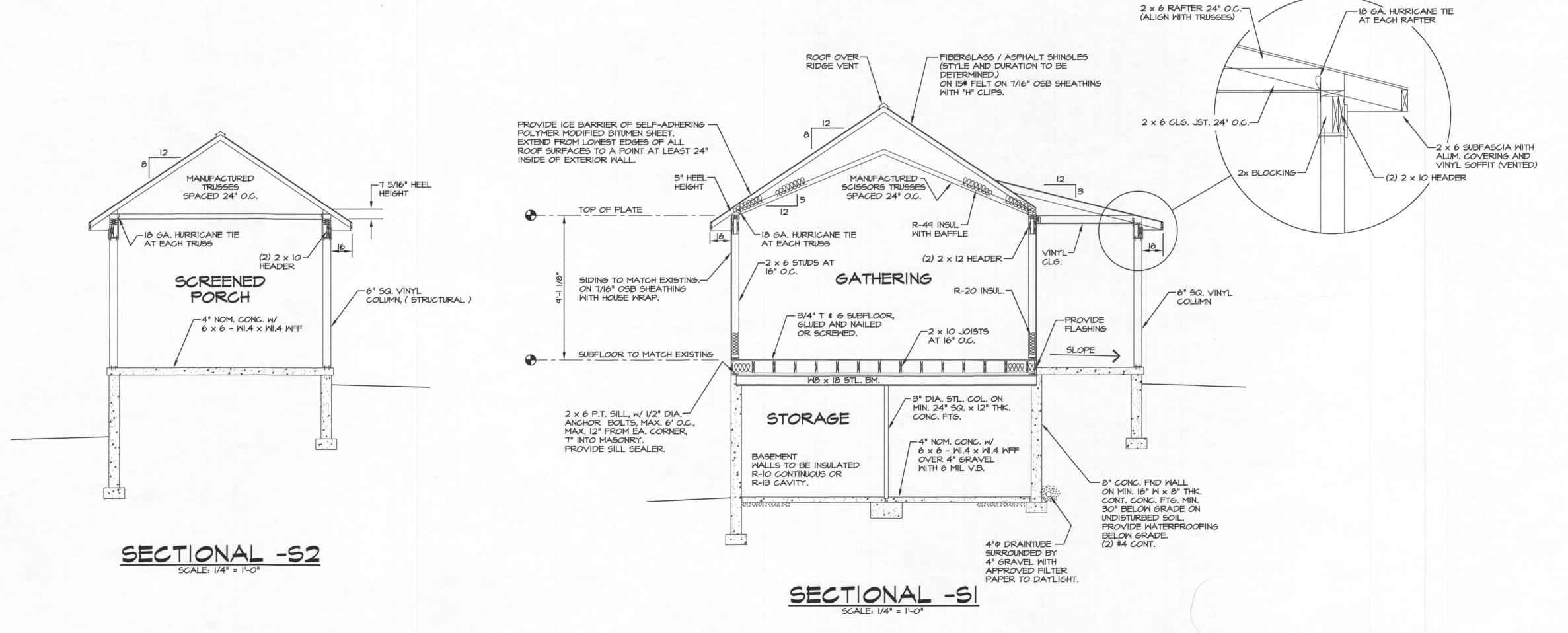
DATE 6-26-16

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OR DETAIL
NUMBER - SHEET NUMBER

GRIM REMODEL CONSTRUCTION -1 DECEMBER 28, 2016

SHEET 4 of 5

SCALE

1/4" = 1'-0: DRAWN BY:

DATE 6-26-16

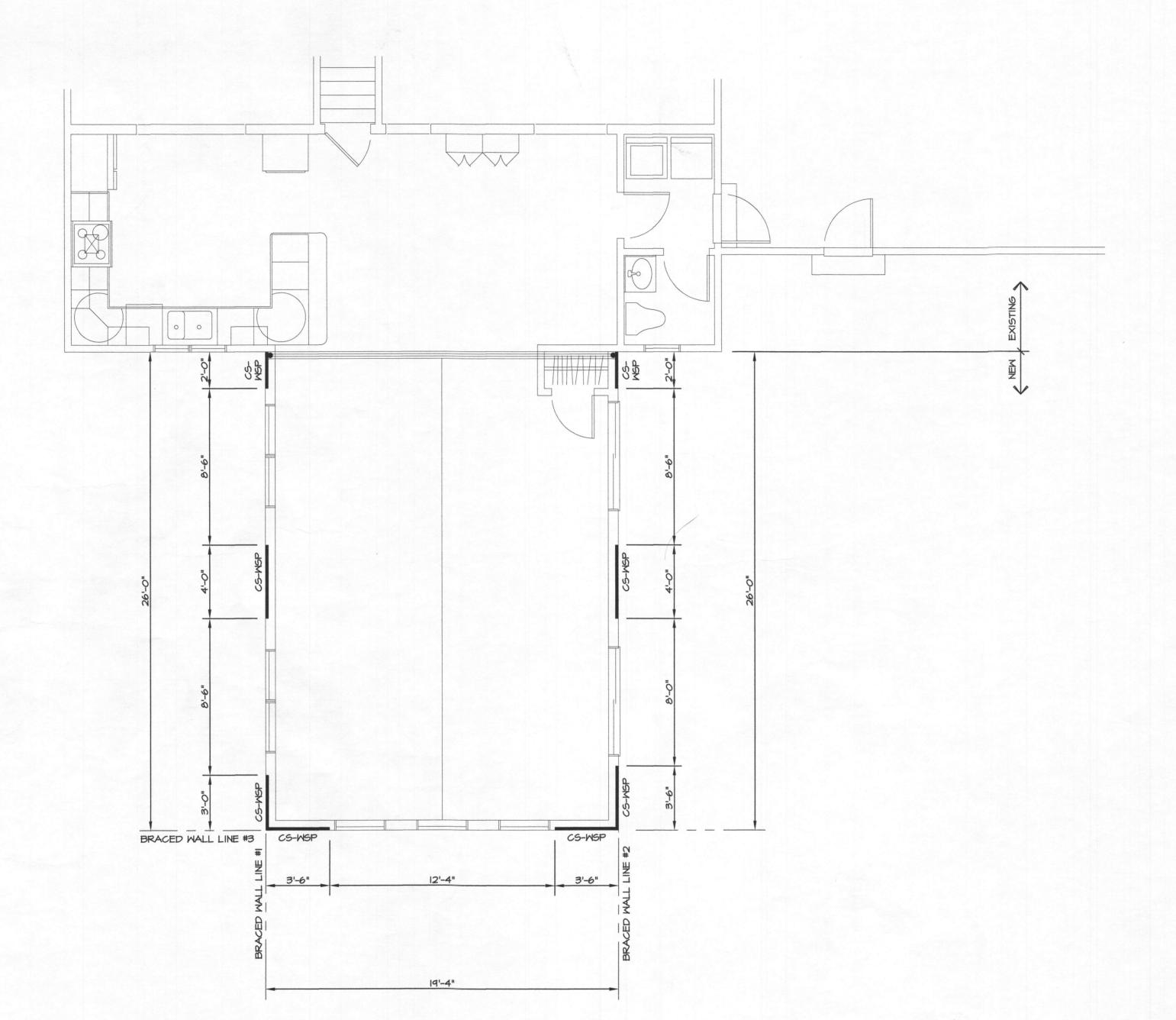
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PROPOS

ESIGN ESIGN



MALL BRACING PLAN

SCALE: 1/4" = 1'-0"

	BRACE	D WALL	TABLE	
BRACED WALL LINE	BRACED WALL LINE SPACING	METHOD	MINIMUM LENGTH REQUIRED	LENGTH PROVIDED
LINE #I	19'-4"	CS-MSP	5.0'	9.0'
LINE #2	19'-4"	CS-MSP	5.0'	9.5'
LINE #3	26'-0"	CS-MSP	6.2'	7.0'

CS-WSP = CONTINUOUS SHEATHING - WOOD STRUCTURAL PANEL

### WALL BRACING DESIGN INFORMATION:

1. LOCATION: HOWARD COUNTY, MARYLAND 2. SEISMIC CATAGORY: B

3. WIND SPEED: 115 MPH 4. METHOD: CONTINUOUS SHEATHING - WOOD STRUCTURAL PANELS.

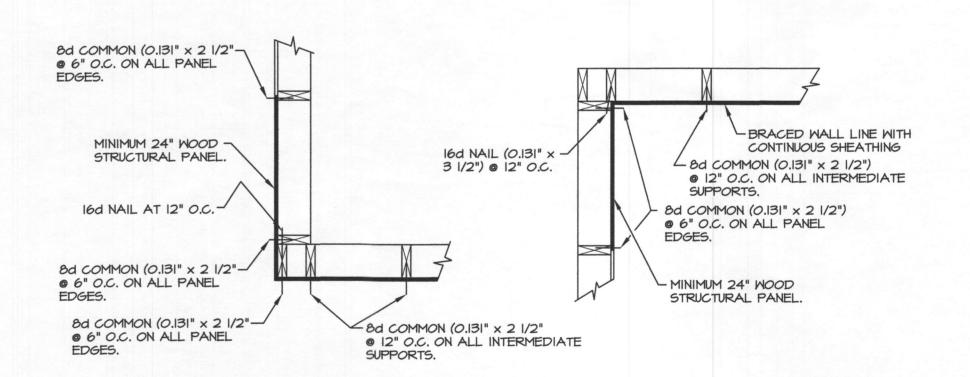
# WALL BRACING DIAGRAMS

CONTINUOUS SHEATHING METHOD OF WIND BRACING.

(ALL AREAS TO BE SHEATHED WITH 7/16" OSB SHEATHING, INCLUDING AREAS ABOVE DOORS AND WINDOWS.)

#### CONNECTION CRITERIA

8d COMMON (2 1/2" x O.131") NAILS AT 6" SPACING (PANEL EDGES) AND 12" SPACING (INTERMEDIATE SUPPORTS) OR 16 GA. x 1 3/4" STAPLES AT 3" SPACING (PANEL EDGES) AND 6" SPACING (INTERMEDIATE SUPPORTS).



INSIDE AND OUTSIDE FRAMING DETAIL

OR DETAIL NUMBER SHEET NUMBER

GRIM REMODEL
CONSTRUCTION -1
DECEMBER 28, 2016

5 of 5

SCALE AS NOTED

DRAWN BY:

DATE 6-26-16

CADFILE GRIM-CON2

ESIGN West