



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

DILP 2017 JUL 25 PM 1:55

Date Received: _____

Permit No.: 817002794

Building Address: 713 Weller Drive
City: Mt. Airy State: MD Zip Code: 21771
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: 2081
Section: _____ Area: _____ Lot: 51
Tax Map: 0002 Parcel: 0227 Grid: 0024
Zoning: _____ Map Coordinates: _____ Lot Size: _____
Existing Use: Single Family Home
Proposed Use: Single Family Home
Estimated Construction Cost: \$ 800.00
Description of Work: Installation of a (1) 500 gallon underground propane tank
Occupant/Tenant Name: Shawn Mullan
Was tenant space previously occupied? ☐ Yes ☒ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: Shawn Mullan
Address: 713 Weller Dr
City: Mt. Airy State: MD Zip Code: 21771
Phone: 443-790-2374 Fax: _____
Email: _____
Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____
Contractor Company: Southern States Corp.
Contact Person: Jay Nusbaum
Address: 121 John St
City: Westminster State: MD Zip Code: 21157
License No.: 20100060625
Phone: 410-848-9420 Fax: 410-848-7852
Email: Jay.Nusbaum@SSCorp.com
Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
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 st floor: _____
Area of construction (sq. ft.): _____	2 nd floor: _____
Use group: _____	Basement: _____
Construction type: _____	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Wood Frame	No. of Bedrooms: _____
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>
	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
	<input type="checkbox"/> Manufactured Home

Utilities
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
Sprinkler System:
<input type="checkbox"/> Yes <input 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: Jay Nusbaum
Email Address: Jay.Nusbaum@SSCorp.com
Title/Company: Manager, Southern States
Print Name: Jay Nusbaum
Date: 7/25/17
JUL 25 2017
RECEIVED
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		

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	\$ 100
Tech Fee	\$ 10
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ 110.00
Sub-Total Paid	\$
Balance Due	\$
Check	# 00178966



17 Rock Church Lane
Elverson, PA 19520
(484) 824-4545
Sales: (484) 332-5151

PROJECT QUOTATION

Date: 10/20/2016	
Quotation For: Shawn Mullan	
Address:	
City, State & Zip:	
Project:	
Take-Off By: DS	Priced By: DS

Construction Site:
Site Address:
City, State & Zip:
Price shown is only good for acceptance by customer for 30 days from the date of this quotation.
Total Contract Price: \$18,900.00

Building Specifications:

Dimensions (Width X Length X Bottom Chord Height): 32' 0" x 40' 0" x 12' 6"

Overhangs (Eave1/Eave2/End): 12/12/12

Loading: 30/5/0/5 Pitch: 4

Truss Spacing: 4' Roof Purlin Size: 2 x 4 Roof Purlin Spacing: 2'

Side Wall Post Spacing: 8' End Wall Post Spacing: 8'

Line Post Size: 5.5x6.75

Post Depth: 3' 5" Hole diameter: 18

Wall Girt Size: 2 x 4 Wall Girt Spacing: 24

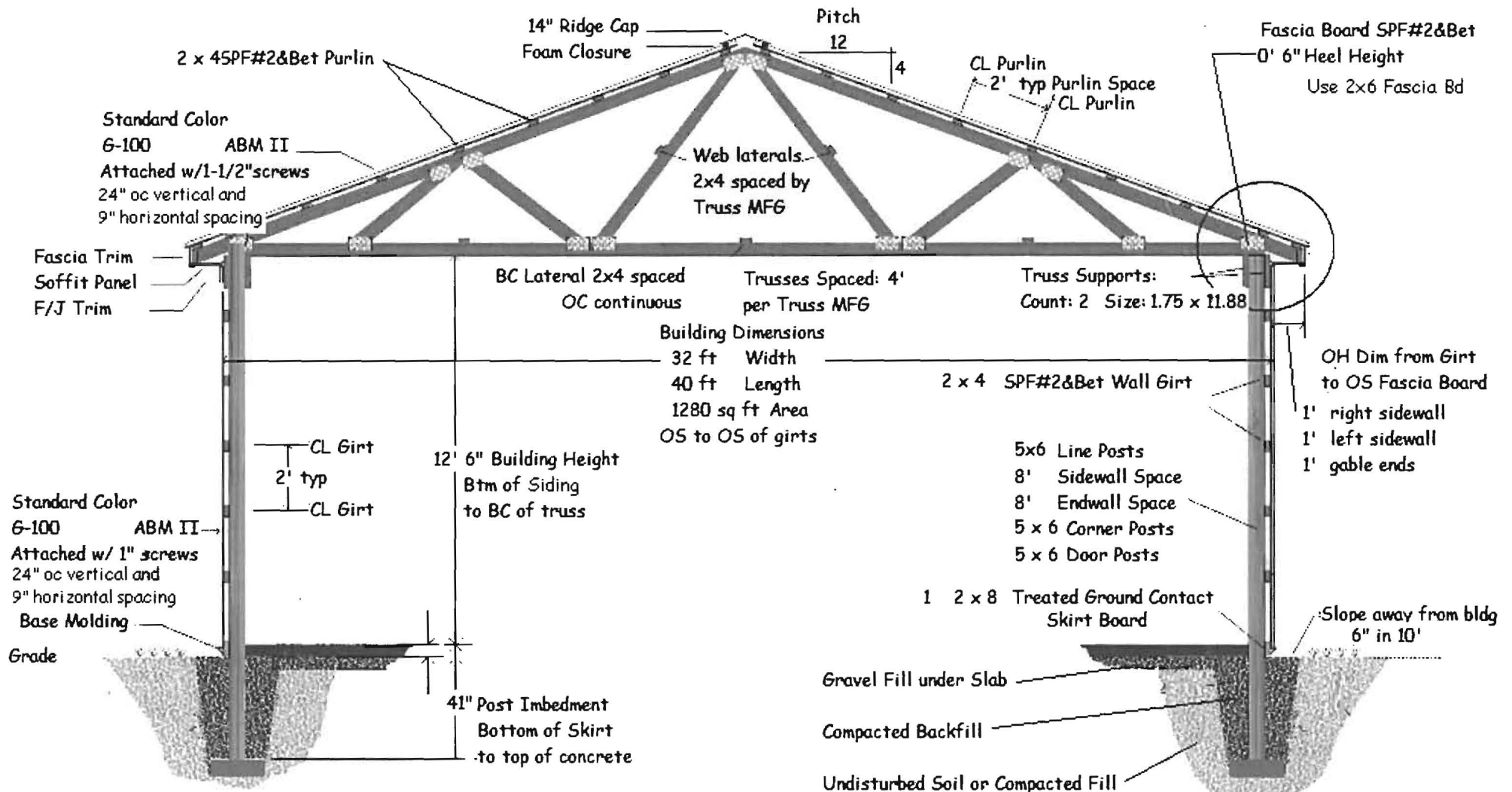
of Treated Skirt Board Rows: 1 Skirt Board Size: 2 x 8

Roofing: G-100 ABM II color Standard C

Siding: G-100 ABM II color Standard C

Shawn Mullan @ yahoo.com

BUILDING CROSS SECTION



Concrete footing to be sized for applicable loads and soil conditions



Date: 10/20/2016
 Shawn Mullan
 QNM2 — quote name line 2
 QNM3 — quote name line 3
 QDT1 — quote deliver line 1



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(484) 824-4545
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Address:	
City, State & Zip:	
Project:	
Take-Off By: DS	Priced By: DS

Construction Site:
Site Address:
City, State & Zip:
Price shown is only good for acceptance by customer for 30 days from the date of this quotation.
Total Contract Price: \$18,900.00

Note: This proposal may be withdrawn by us if not accepted within 30 days.

Date: _____

Adding flat delivery of \$300.00

SUBTOTAL: \$15,780.00

Adding flat overhead doors of \$3,120.00

SUBTOTAL: \$18,900.00

TOTAL: \$18,900.00



17 Rock Church Lane
Elverson, PA 19520
(484) 824-4545
Sales: (484) 332-5151

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Date: 10/20/2016	
Quotation For: Shawn Mullan	
Address:	
City, State & Zip:	
Project:	
Take-Off By: DS	Priced By: DS

Construction Site:
Site Address:
City, State & Zip:
Price shown is only good for acceptance by customer for 30 days from the date of this quotation.
Total Contract Price: \$18,900.00

SKU Qty Product Description

1 Door 16 w x 10 white Clopay 4050 Series Insulated Overhead Door
1 Door 10 w x 10 white Clopay 4050 Series Insulated Overhead Door
1 Door 3 w x 6.67 Wd Jamb Steel Door ABM WD RI 9 Lite
19 unitized concrete N/A ABM Pad/Cookie-Conc

OPTION #1 Leave 3' on Bottom of Wall for Stone Wainscoting (Sheathing and Felt Paper Only) 850.00
OPTION #2 6" Smooth Finish Fiber Concrete Slab 32x40 Area w/ Stone Base & 10 Ga. Wire Mesh 6,528.00
OPTION #3 Ceiling Insulation R-30 w/ White 28 Ga. Liner Panel 3,050.00
OPTION #4 Wall Insulation R-19 w/ Interior Purlins at 2' O.C. 2,380.00
OPTION #5 Double Bubble Vapor Barrier on Roof 1,030.00
OPTION #6 Gutter Installation 950.00

THE ABOVE PRICES ARE LABOR INCLUSIVE^

Buyer agrees not to occupy any part of structure without written consent until full payment, plus any extras, has been paid in full.

We propose hereby to furnish material and labor, complete in accordance with above specifications for the price indicated above.

Buyer assumes responsibility for clean up and removal of construction debris. Buyer agrees to pay for and obtain required Permits. Buyer agrees to furnish level building site--Contract does not include fill. Contractor assumes no responsibility for damage of underground wire, pipeline, etc. Drilling of post holes through stone will be done at additional charge to Buyer. No warranty expressed or implied on any material except that expressed by manufacturer. All material is guaranteed to be as specified. All work is to be completed in a workmanlike manner according to standard practices. Any alteration or diversion from above application involving extra costs will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Buyer is to carry fire, tornado, and other necessary insurance. Our workers are fully covered by Worker's Compensation Insurance. In the event Buyer shall fail to pay any amount when the same shall be due, such amounts shall bear interest from the time they are due until paid at the rate of 24% per annum. If this contract is placed in the hands of an attorney for collection, or if collected by any legal proceedings, Buyer agrees to pay Seller its reasonable attorney's fees incurred in connection with the enforcement of this Contract. Buyer acknowledges that the Seller may have a right to file a lien against the project and that it is the intention of the Seller to do so in the event the Buyer does not timely fulfill its payment obligations herein."

Payment to be made as follows:
1,000.00 Deposit with Order
2/3 Upon Delivery
1/3 When substantially Complete

Acceptance of Proposal -- The above parties, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Because of IRS regulations, cash payments in excess of 5,000.00 need to have prior arrangements made with your sales person.

Signature: _____

Authorized Signature _____

Signature: _____



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.: P1600239577

Building Address: 712 Walker Drive
City: Montgomery State: MD Zip Code: 21771
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: 51
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____
Existing Use: _____
Proposed Use: _____
Estimated Construction Cost: \$ _____
Description of Work: 4111 ...
Occupant or Tenant: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: Sharon A. Miller
Address: _____
City: Montgomery State: MD Zip Code: 21771
Phone: 410-711-7274 Fax: _____
Email: _____
Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____
Contractor Company: TAM P. ...
Contact Person: M. ...
Address: _____
City: Montgomery State: MD Zip Code: 21771
License No.: M1290
Phone: 301-521-1415 Fax: 301-521-1823
Email: mike.burke@tamper.com
Engineer/Architect Company: ...
Responsible Design Prof.: _____
Address: _____
City: Montgomery State: MD Zip Code: 21771
Phone: 301-521-1415 Fax: 301-521-1823
Email: ...

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	<u>Depth</u> <u>Width</u>
Gross area, sq. ft./floor:	1 st floor:
	2 nd floor:
Area of construction (sq. ft.):	Basement:
	<input type="checkbox"/> Finished Basement
Use group:	<input checked="" type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
<u>Construction type:</u>	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>
<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
<u>Water Supply</u>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
<u>Sewage Disposal</u>
<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 type="checkbox"/> No
<u>Heating System</u>
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
<u>Sprinkler System:</u>
<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Grading Permit Number:</u>
<u>Building Shell Permit Number:</u>

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		

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	#

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

Date: 9-29-16

To: Plan Review / zoning / Engineering / Health
(Person's Name and Division)

From: Shawn Mullan (443) 790-2374
(Your Name, Company Name and Telephone Number)

Subject: Project name Mullan Residence

Project site address 713 Weller Drive

Permit # B16003977 SDP # _____

Other information pertinent to this project _____

☒ Please check the attachments below that you are submitting with this transmittal:

____ Letter of response to address plan review comment letter

____ Revised plans and/or revised details: When submitting for a complete re-review, duplicate sets shall be submitted.

____ Letter Summarizing Changes

____ Energy conservation calculations

____ Copies of _____ (be specific).

____ Health Department Request

____ DPZ/ DED Request

____ Applicant's Request

____ Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____

☒ Other Plot plans

Contact Person Information: (Required)

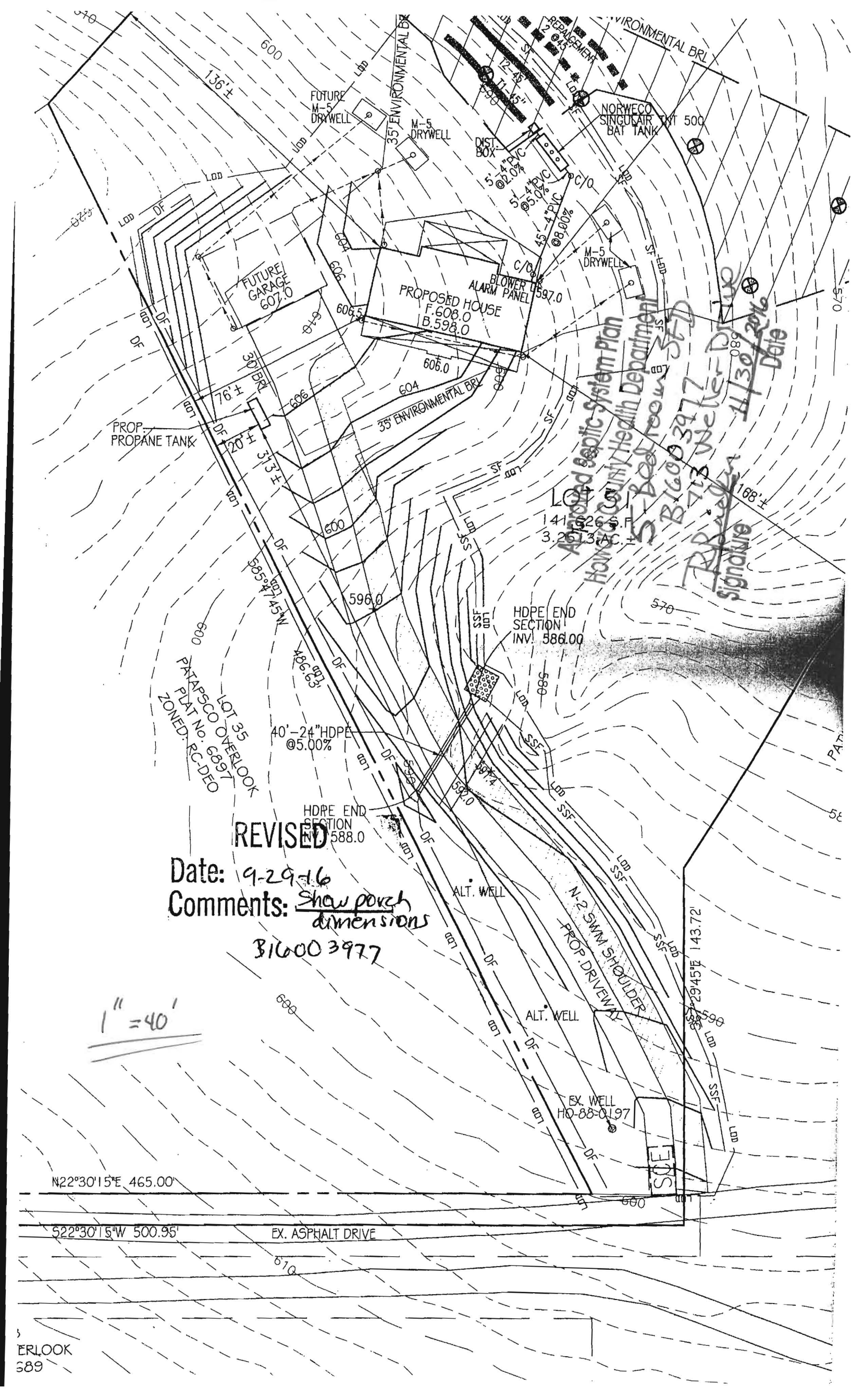
Please Print Name

Telephone No:

E-Mail Address:

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 _____



PROP. PROANE TANK

PROPOSED HOUSE
F. 608.0
B. 598.0

LOT 35
PATAPSCO OVERLOOK
PLAT No. 6897
ZONED: RC-DEO

REVISED

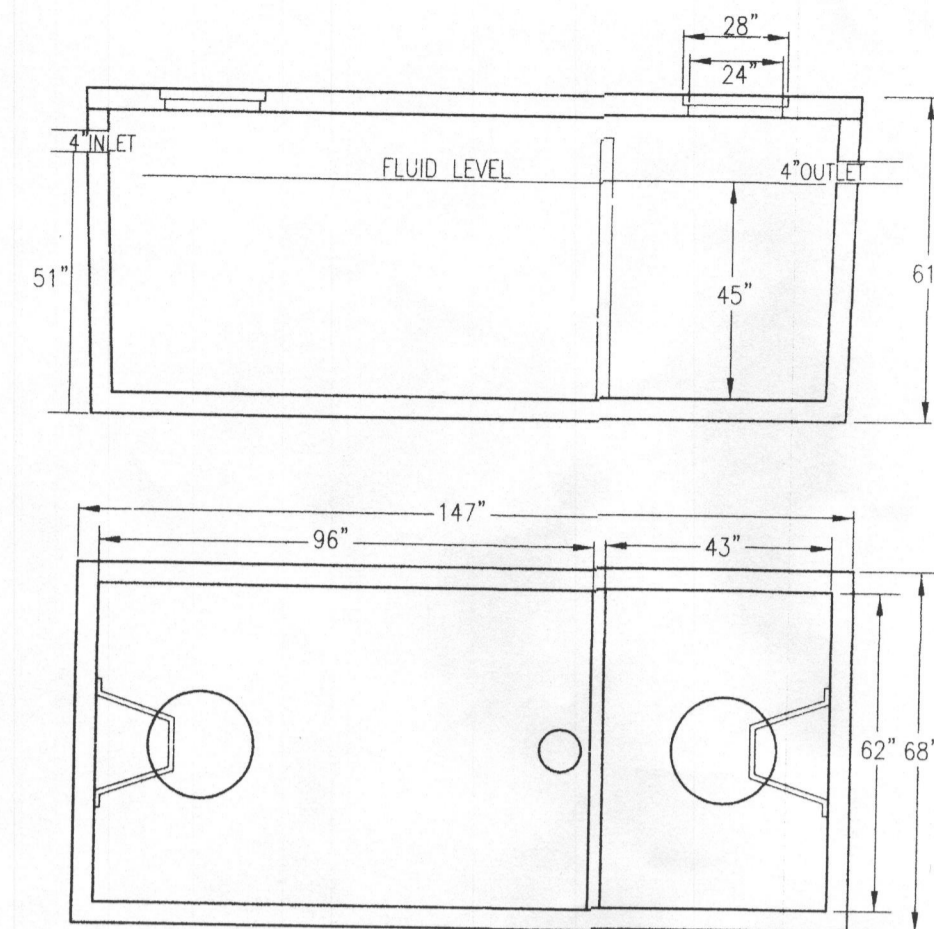
Date: 9-29-16
Comments: Show porch dimensions
B16003977

1" = 40'

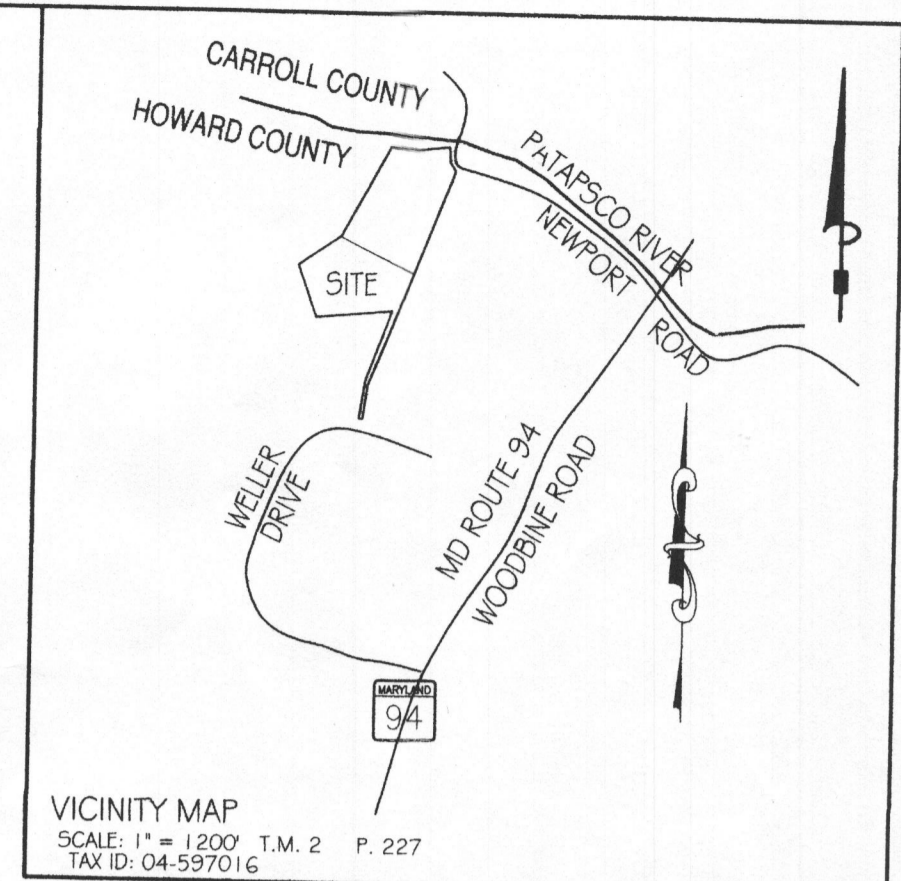
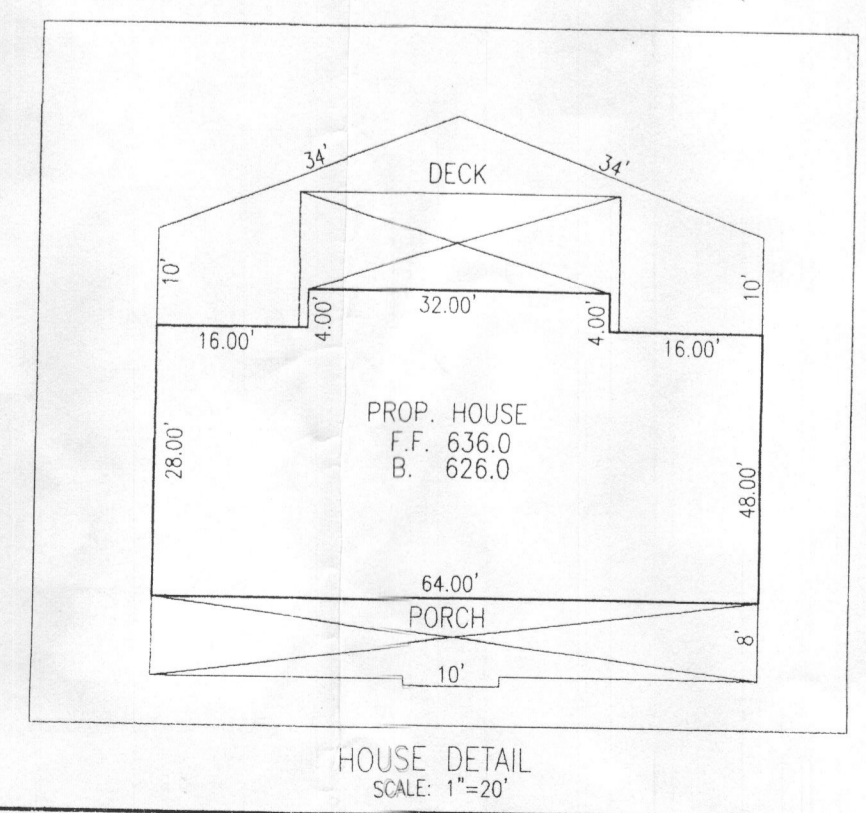
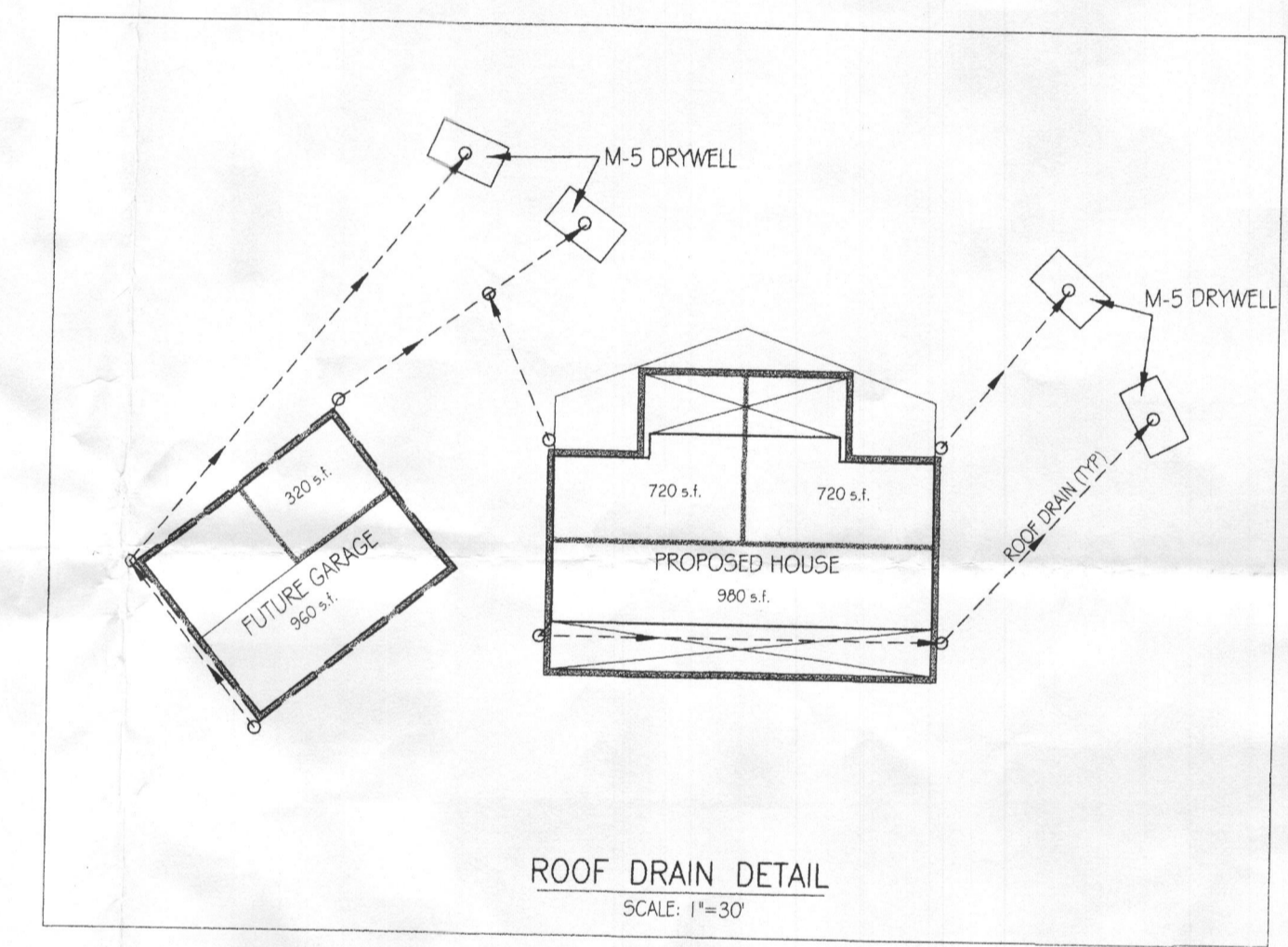
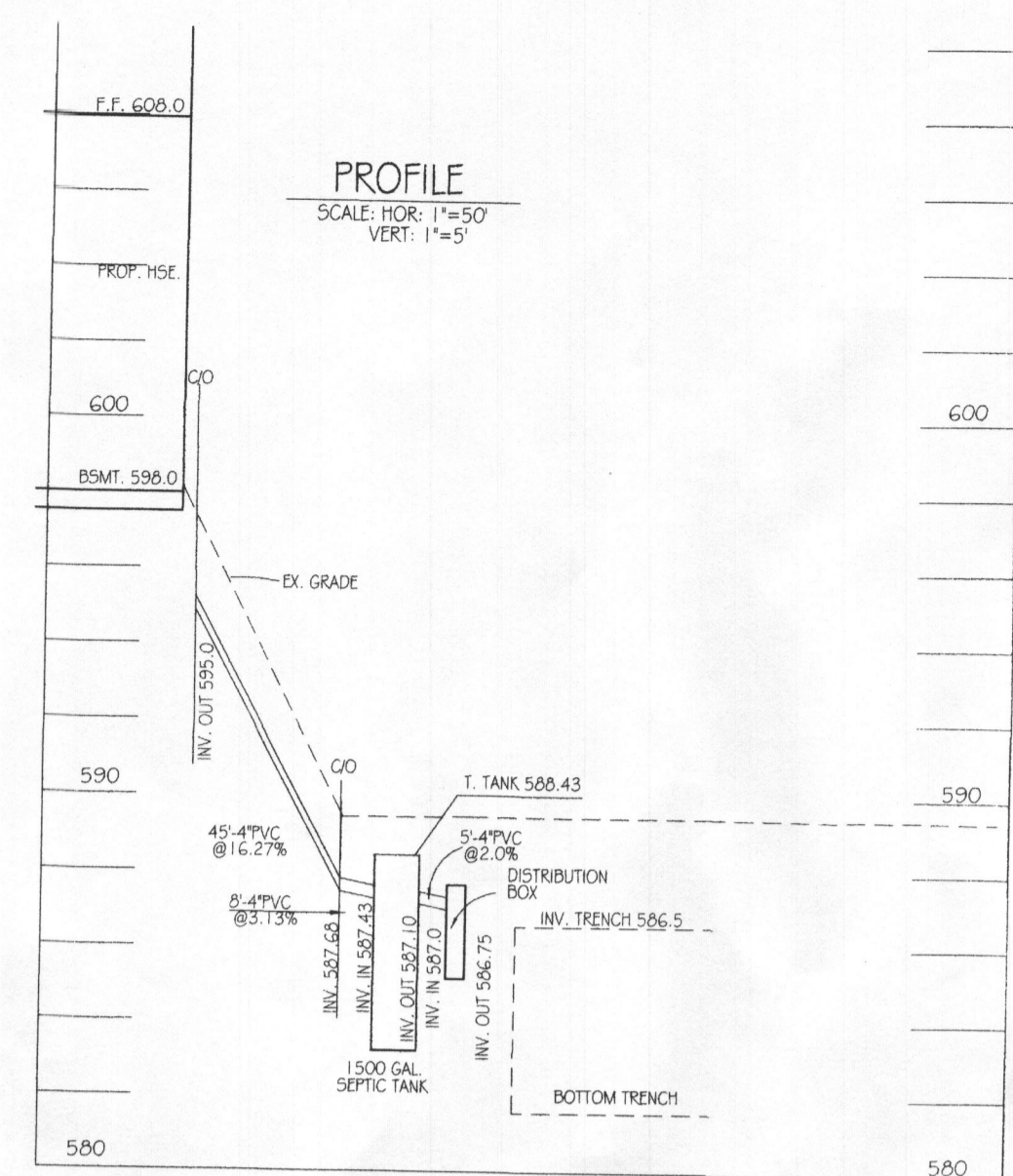
N22°30'15"E 465.00'

S22°30'15"W 500.95'

EX. ASPHALT DRIVE



1500 GALLON
2-COMPARTMENT SEPTIC TANK
N.T.S.



- GENERAL NOTES:
- TOPOGRAPHY & PLANIMETRIC FEATURES SHOWN HEREON TAKEN FROM COPYRIGHTED GIS DATA FROM HOWARD COUNTY, SUPPLEMENTED WITH FIELD LOCATIONS BY VANMAR ASSOCIATES, INC. CONTOUR INTERVAL IS 2 FEET. VERTICAL DATUM IS NAVD83.
 - THE EXISTING WELLS SHOWN ON THIS PLAN HAVE BEEN FIELD LOCATED BY VANMAR ASSOCIATES OR TAKEN FROM AVAILABLE RECORDS AND ACCURATELY SHOWN.
 - ZONING DISTRICT: RC-DEO
 - LIMIT OF DISTURBANCE (LOD) = 50,291 SQ. FT.
 - THERE ARE NO STREAMS, PONDS, FLOODPLAINS OR WETLANDS ON THIS LOT.
 - STORMWATER MANAGEMENT REQUIREMENTS FOR LOT 51 WILL BE ADDRESSED BY USING THE 2000 MDC STORMWATER MANAGEMENT REGULATIONS AS AMENDED IN 2008 TO USE FSD TO THE MDC ONLY STORMWATER MANAGEMENT PRACTICES FOR LOT 51 ARE SUBJECT TO THE RECORDED DECLARATION OF COVENANTS.

SEPTIC SYSTEM TRENCH DESIGN

INITIAL NUMBER OF BEDROOMS = 5
APPLICATION RATE = 0.8 GPD / sq. ft.
DESIGN FLOW: 150 GPD X 5 BEDROOMS = 750 GPD
750 GPD / 0.8 GPD/sq. ft. = 937.5 sq. ft.
937.5 sq. ft. / 3 ft. WIDE TRENCH = 312.5 LF TRENCH
312.5 LF TRENCH X 0.36 REDUCTION CREDIT = 112.5 LF TRENCH
TRENCH 1 (T1) EX. GRD=589.5 - INV. TRENCH=586.5 - B. TRENCH=581.5
TRENCH 2 (T2) EX. GRD=586.5 - INV. TRENCH=583.5 - B. TRENCH=578.5

1st REPLACEMENT
APPLICATION RATE = 0.8 GPD / sq. ft.
DESIGN FLOW: 150 GPD X 5 BEDROOMS = 750 GPD
750 GPD / 0.8 GPD/sq. ft. = 937.5 sq. ft.
937.5 sq. ft. / 3 ft. WIDE TRENCH = 312.5 LF TRENCH
312.5 LF TRENCH X 0.36 REDUCTION CREDIT = 112.5 LF TRENCH

- SITE PLAN NOTES:
- ANY CHANGE TO THE LOCATIONS OR DEPTHS TO ANY COMPONENTS MUST BE APPROVED BY THE ENGINEER AND THE HOWARD COUNTY HEALTH DEPARTMENT PRIOR TO INSTALLATION. A REVISED SITE PLAN MAY BE REQUIRED.
 - MAXIMUM COVER OVER THE TANK IS 3 FEET. GREATER DEPTH WILL REQUIRE A HEAVY LOAD BEARING TANK.
 - ELECTRICAL WORK FOR THE INSTALLATION MUST BE PERFORMED BY A LICENSED ELECTRICIAN.
 - THE WELL (TAG #10-88-0197) HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN.
 - ALL WELLS AND SEPTIC SYSTEMS LOCATED WITHIN 100' OF THE PROPERTY BOUNDARIES AND 200' DOWN GRADIENT OF ANY WELLS AND OR SEPTIC SYSTEMS HAVE BEEN SHOWN.

Approved Septic System Plan
Howard County Health Department
Dana Perard
Signature: *Dana Perard* Date: 8/4/17
B 17002194

DEVELOPER'S CERTIFICATE:

I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN OF DEVELOPMENT FOR EROSION AND SEDIMENT CONTROL, AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON SITE INSPECTIONS BY THE HOWARD SOIL CONSERVATION DISTRICT.

DEVELOPER: *Shawn & Ashley Mullen* DATE: 6/6/2016

ENGINEER'S CERTIFICATE:

I HEREBY CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT AND THE 2011 MARYLAND STANDARDS & SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.

ENGINEER: *Ronald F. Thompson, P.E.* DATE: 6/1/2016

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.

HOWARD SOIL CONSERVATION DISTRICT: *John C. Blanton* DATE: 7/12/16

OWNER / DEVELOPER
SHAWN & ASHLEY MULLEN
1751 THEALE WAY
HANOVER, MD 21076
443-790-2374

DATE: 09/29/16
REVISIONS:
09/29/16 FRONT PORCH
10/31/16 5 BEDROOMS
11/30/16 SEPTIC TANK
05/30/17 GARAGE SIDEYARD SETBACK

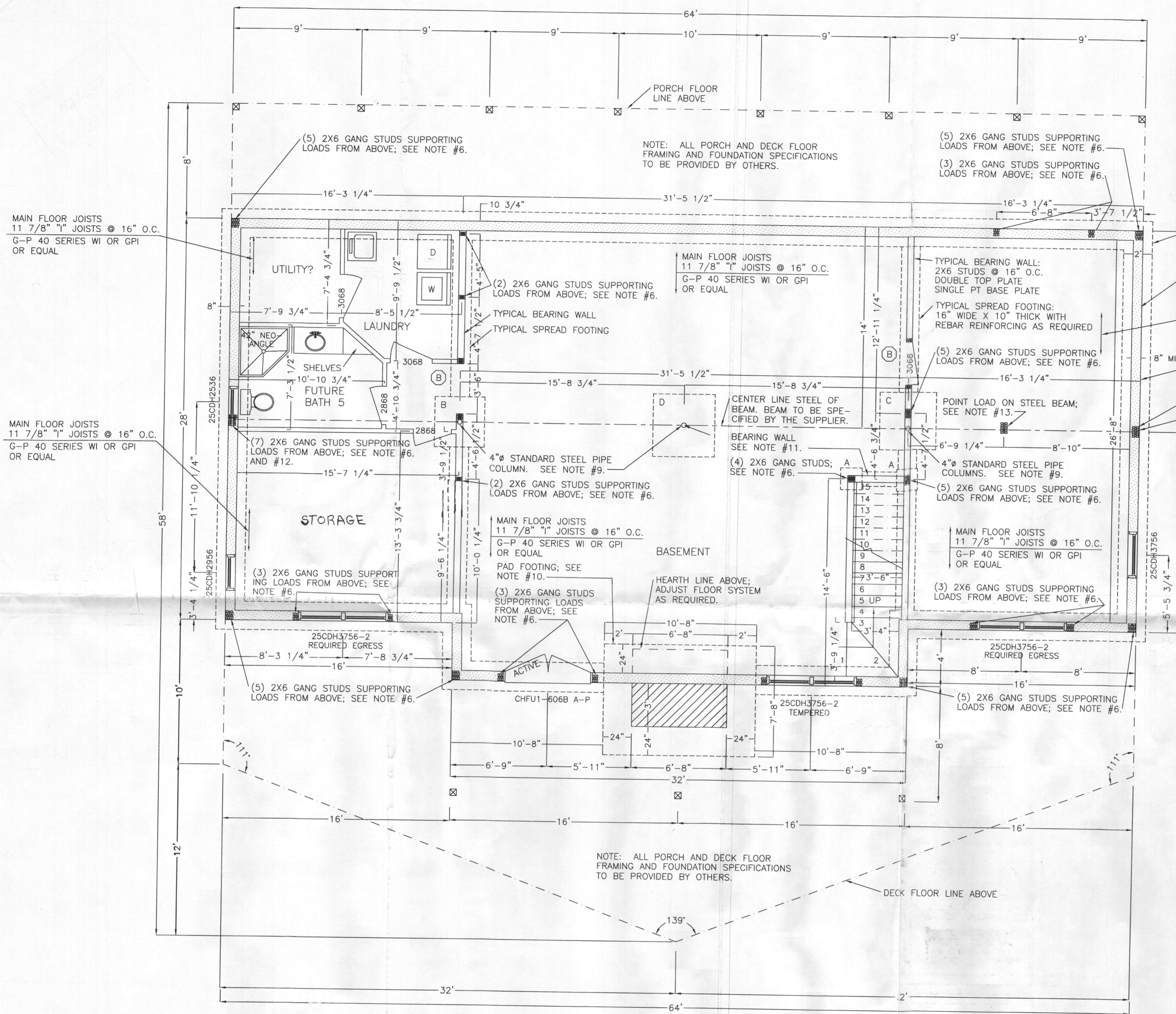
STATE OF MARYLAND
PROFESSIONAL ENGINEER
VANMAR ASSOCIATES, INC.

PLOT PLAN
LOT 51
PATAPSCO OVERLOOK
PLAT No. 22981
TAX ID: 04-597016
713 WELER DRIVE
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1" = 40' MAY, 2016

VANMAR ASSOCIATES, INC.
Engineers Surveyors Planners
310 South Main Street Mount Airy, Maryland 21771
(301) 829-2890 (301) 831-5015 (410) 549-2751
Fax (301) 831-5603 ©Copyright, Latest Date Shown

SHEET 1 OF 2

PROFESSIONAL CERTIFICATION
I hereby certify that these documents were prepared or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland, License No. 18417, Expiration Date: 9-18-17.



FLOOR TO FLOOR DIMENSIONS	
SLAB TO TOP OF FOUNDATION WALL	104"
2X PT SILL	1.5"
1" JOISTS	11.875"
3/4" SUBFLOOR	.75"
TOTAL:	118.125"

FOOTING SCHEDULE	
A	18"x18"x12" WITH (2) #4 REBAR 10" APART EACH WAY
B	42"x42"x12" WITH (4) #4 REBAR 10" APART EACH WAY
C	48"x48"x12" WITH (5) #4 REBAR 10" APART EACH WAY
D	52"x52"x12" WITH (7) #4 REBAR 7.5" APART EACH WAY

FOUNDATION PLAN & MAIN FLOOR FRAMING
SCALE: 1/4"=1'-0"

- NOTES:
- CONTRACTOR TO VERIFY ALL STATE AND LOCAL CODES.
 - CONTRACTOR TO VERIFY ALL DIMENSIONS BEFORE EXCAVATION.
 - ALL WINDOW AND DOOR HEADERS TO BE SPECIFIED BY OTHERS.
 - ALL FOUNDATION WALL AND FOOTING SPECIFICATIONS TO BE INSTALLED PER STATE AND LOCAL CODES.
 - ALL FOOTING SIZES BASED ON 2000 PSF ALLOWABLE SOIL BEARING AND 2500 PSI CONCRETE. ALL FOOTINGS TO BE RESIZED FOR DIFFERING CONDITIONS.
 - PAD FOOTING SIZES BASED ON A MAIN FLOOR LOADING OF 60 LBS/PSF.
 - PROVIDE SOLID BLOCKING, UNDER ALL MAIN FLOOR BEARING POINTS AND BEARING WALLS, TO TOP OF COLUMN ASSEMBLY, OR SILL PLATE. ALSO, FUR WIDTH OF JOISTS OR BEAMS TO EQUAL ABOVE BEARING.
 - STAIR SPECIFICATIONS:
9.5" TREADS PLUS 1 1/4" NOSING
(15) RISERS @7.875" EACH
BASED ON FLOOR TO FLOOR DIMENSIONS (SEE SCHEDULE).
 - ALL "I" JOIST SPECIFICATIONS TO BE VERIFIED BY THE MANUFACTURER.
 - TYPICAL COLUMN:
4" STANDARD STEEL PIPE COLUMN WITH AN 8X8X3/4" STEEL TOP PLATE AND A 12X12X3/4" STEEL BASE PLATE. ALL PLATES TO BE WELDED TO COLUMN. ATTACH BASE PLATE TO FOOTING WITH ANCHOR BOLTS EACH CORNER. POUR CONCRETE SLAB AFTER SETTING POST. STEEL SUPPLIER TO VERIFY THAT THE COLUMN ASSEMBLY WILL SUPPORT 33,000 LBS MINIMUM.
 - PAD FOOTING FOR CHIMNEY FOUNDATION INCLUDES SPREAD FOOTING FOR FOUNDATION WALL AND ALL IMPOSED LOADS FROM MAIN FLOOR, DECK FLOOR, RIDGE BEAM LOADS, AND FRAMED MAIN FLOOR WALL AND GABLE WALL. PAD FOOTING SIZE IS 10'-8" X 7'-8" X 18" THICK WITH A MAT OF #8 REBAR @15" O.C. EACH WAY; (14) TOTAL. LOCATE REBAR 1/3 UP FROM BOTTOM OF FOOTING.
 - BEARING WALL SUPPORTS MAIN FLOOR JOISTS. 2X6 STUDS @ 16" O.C. MAXIMUM WITH DOUBLE TOP PLATE AND SINGLE PT BASE PLATE. FOR SPREAD FOOTING THICKEN SLAB TO 8" THICK X 12" WIDE.
 - HEADER OVER BATHROOM WINDOW TO BE SIZED TO SUPPORT RIDGE BEAM AND STEEL BEAM POINT LOADS. 6,480 LB STEEL BEAM POINT LOAD AND 6,750 LB RIDGE BEAM POINT. POINT LOADS HIT 2 1/4" FROM EDGE OF WINDOW ROUGH OPENING. HEADER TO BE SPECIFIED BY OTHERS.
 - STEEL BEAM TO BE SIZED TO SUPPORT MAIN FLOOR LOADS AND A POINT LOAD FROM THE SECOND FLOOR BEAM. SECOND FLOOR BEAM POINT LOAD OF 5,400 LBS. CONVERTS TO 10,832 LBS EQUALLY DISTRIBUTED LOAD. STEEL SUPPLIER TO ADD THIS LOAD TO MAIN FLOOR LOADS.

REVISED
Date: 10/22/14
Comments: Blue 003977

PRELIMINARY
REVISION #2
FINAL DRAWINGS
APPROVED AS DRAWN
APPROVED AS NOTED ON DRAWING
OWNER'S SIGNATURE

A CUSTOM DESIGNED LOG HOME BY
SHAWN & ASHLEY MULLEN

NORTHWEST LOG HOMES
226 KIRKHOFF RD. WESTMINSTER, MD 21158

SHEET
1 OF 9
APRIL 22, 2016

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

Date: 10/26/2016

To: Dan Swinder / Dan Bernard
(Person's Name and Division) SHAWN MULLEN

From: Mullen Residence (443) 790-2374
(Your Name, Company Name and Telephone Number)

Subject: Project name MULLEN RESIDENCE
Project site address 713 Weller Dr. Mt. Airy Md 21771
Permit # B16003977 SDP # _____
Other information pertinent to this project _____

☒ Please check the attachments below that you are submitting with this transmittal:

- ☐ Letter of response to address plan review comment letter
- ☒ Revised plans and/or revised details: When submitting for a complete re-review, **duplicate sets shall be submitted.**
- ☐ Letter Summarizing Changes
- ☐ Energy conservation calculations
- ☒ 3 Copies of basement Floor Plan (be specific).
- ☒ Health Department Request ☐ DPZ/ DED Request ☐ Applicant's Request
- ☐ Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____
- ☐ Other _____

Contact Person Information: (Required)

Mike Swartzbeck T&M Builders
Please Print Name

Telephone No: 301-831-9155

E-Mail Address: miketmbu@comcast.net

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 AKH

REVISED BSMT FLOOR PLAN
PER HEALTH DEPT - FUTURE
BR CHANGED TO STORAGE