



Building Permit Application

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

DATE 2017 SEP 19 PM 12:0

Date Received: _____

Permit No.: **B17003487**

Building Address: **14885 TRIAD DELPHIA ROAD**
City: **GLENELG** State: **MD** Zip Code: **21737**
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: **JEREMY STARON**
Section: _____ Area: _____ Lot: **3**
Tax Map: **27** Parcel: **125** Grid: **4**
Zoning: **RL-DEO** Map Coordinates: _____ Lot Size: **5.01A**
Existing Use: **VACANT/UNDEVELOPED**
Proposed Use: **NEW RESIDENTIAL - SFD**
Estimated Construction Cost: \$ **550,000**
Description of Work: **CONSTRUCTION OF NEW SINGLE FAMILY DETACHED HOME AND CORRESPONDING SITE IMPROVEMENTS**
Occupant/Tenant Name: **NA**
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: **WHEELER ANGLIN CO**
Address: **12551 FOREMAN BLVD.**
City: **CLARKSVILLE** State: **MD** Zip Code: **20871**
Phone: **240 361 7260** Fax: _____
Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: **STIRLING HOMES - DAVE SADLER**
Address: **20901 NEW HAMPSHIRE AVE.**
City: **BROOKVILLE** State: **MD** Zip Code: **20833**
Phone: **301 974 4899** Fax: _____
Email: **davidksadler@aol.com**

Contractor Company: **STIRLING HOMES AND DEV. LLC**
Contact Person: **DAVE SADLER**
Address: **20901 NEW HAMPSHIRE AVE**
City: **BROOKVILLE** State: **MD** Zip Code: **20833**
License No.: **MHBR # 6665**
Phone: **301 974 4899** Fax: _____
Email: **davidksadler@aol.com**

Engineer/Architect Company: **ROBERT H. VOGEL ENG. INC.**
Responsible Design Prof.: **ROBERT VOGEL**
Address: **8407 MAIN ST.**
City: **ELICOTT CITY** State: **MD** Zip Code: **21043**
Phone: **410 461 7666** Fax: **410 461 8961**
Email: **RVOGEL@VOGELENG.COM**

Commercial Building Characteristics	Residential Building Characteristics
Height: _____	<input checked="" type="checkbox"/> F Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: _____	Depth _____ Width _____
Basement area, sq. ft./floor: _____	1 st floor: 68' 70'
Area of construction (sq. ft.): _____	2 nd floor: 68' 55'
Use group: _____	Basement: _____
Construction type: _____	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Unfinished Basement
<input checked="" 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: 5
<input type="checkbox"/> State Certified Modular	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: _____
Roadside Tree Project Permit <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Footings: _____
Roadside Tree Project Permit # _____	Roof: _____
	<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 checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: GP-17-101	
Building Shell Permit Number: G17000292	

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: **DAVE SADLER**
Email Address: **davidksadler@aol.com**

Print Name: **DAVE SADLER**
Date: **9-12-17**

Title/Company: _____

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? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START		

DPZ SETBACK INFORMATION
Front: 75
Rear: 60
Side: 30
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: 117
SDP/Red-line approval date: 11/17

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Per Fee	\$ 50
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# 2902

Distribution of Copies: White: Building Officials Green: PSZA, Zoning Yellow: PSZA, Engineering Pink: Health Gold: SHA

ND MITHU fees

Oswald, Hank

From: Oswald, Hank
Sent: Thursday, October 12, 2017 8:21 AM
To: Rob Vogel (Rob.Vogel@timmons.com); Rob Vogel (rvogel@vogeleng.com)
Subject: B17003487_14885 Triadelphia Road_OSDS Plan

Hi Rob:

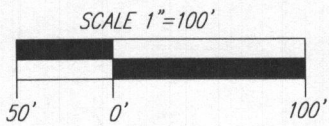
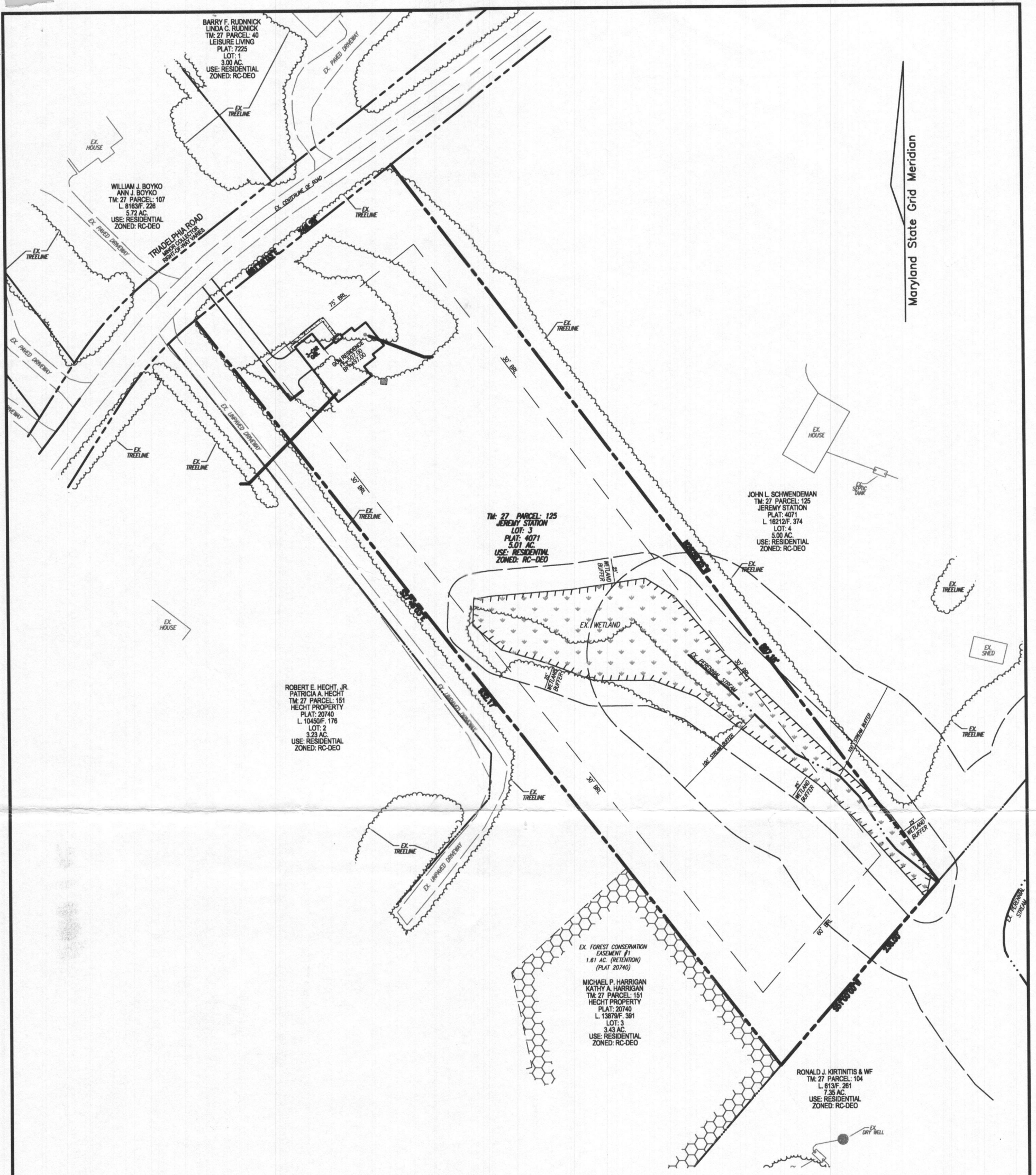
Good morning. The building permit and floor plans for 14885 Triadelphia Road show 5 bedrooms with a potential for a 6th bedroom in the basement. The OSDS Plan was designed for only 4 bedrooms. Please revise the OSDS Plan to accommodate at least 5 bedrooms if not 6 bedrooms.

Should you have any questions, please don't hesitate to ask.

Respectfully,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
8930 Stanford Boulevard
Columbia, MD 21045
410.313.1786 (Office)
410.313.2648 (Fax)



OVERALL SITE
SCALE: 1"=100'

ROBERT H. VOGEL
ENGINEERING, INC.
ENGINEERS • SURVEYORS • PLANNERS
8407 MAIN STREET TEL: 410.461.7666
ELLICOTT CITY, MD 21043 FAX: 410.461.8961

OWNER
TERRIAN TZENG GOH
LINHUA TZENG GOH
12551 FOREMAN BLVD.
CLARKSVILLE, MD 20871
(301) 974-4899

BUILDER
STIRLING HOMES AND DEVELOPMENT
20901 NEW HAMPSHIRE AVE.
BROOKVILLE, MD 20833
(301) 974-4899

SCALE AS SHOWN
DRAWN BY JMR
CHECKED BY RHV
DATE AUGUST 2017
W. O. # 17-14
SHEET# 1 OF 5

5TH ELECTION DISTRICT
TAX MAP: 27 GRID: 04

PLOT PLAN

JEREMY STATION – LOT 3

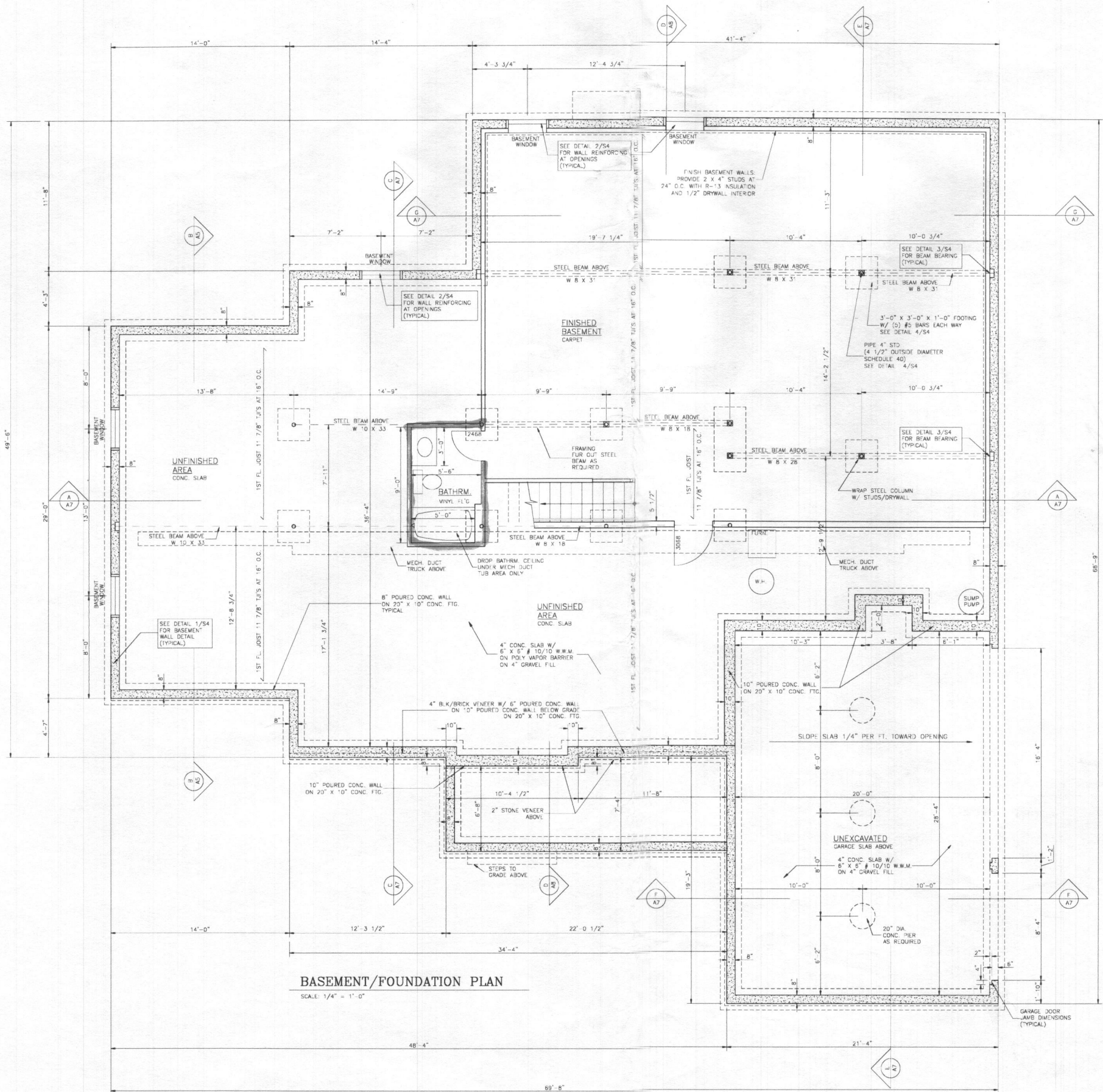
14885 TRIADELPHIA ROAD
GLENELG, MD 21737
(L. 17169 / F. 17)

REF: GP-17-101

PARCEL: 125
ZONED: RC-DEO
HOWARD COUNTY, MARYLAND

B17003487

HEALTH



BASEMENT/FOUNDATION PLAN

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

Code Information

All contractors to comply with applicable Building Codes:

- BUILDING:
 - INTERNATIONAL BUILDING CODE, 2015 EDITION
 - INTERNATIONAL BUILDING CODE FOR ONE AND TWO FAMILY DWELLINGS, 2015 EDITION
 - INTERNATIONAL CODE LOCAL AMENDMENTS
- MECHANICAL:
 - INTERNATIONAL MECHANICAL CODE, 2015 EDITION
 - INTERNATIONAL ENERGY CONSERVATION CODE, 2015 EDITION
 - THE LIFE SAFETY CODE, 2015 EDITION
- ELECTRICAL:
 - 2015 NATIONAL ELECTRICAL CODE WITH LOCAL AMENDMENTS (NFPS 70)
 - ELECTRICAL REGULATIONS AND LOCAL AMENDMENTS
- PLUMBING:
 - 2015 NATIONAL STANDARD PLUMBING CODE ILLUSTRATED
 - 2015 NATIONAL FUEL GAS CODE (NFPA 54)
 - PLUMBING CODE LOCAL AMENDMENTS

GENERAL NOTES:

- CONTRACTOR TO VERIFY ALL PROPOSED DIMENSIONS PRIOR TO CONSTRUCTION. NOTIFY ANY DISCREPANCIES IN A TIMELY MANNER.
- ALL WORK SHALL BE PERFORMED ACCORDING TO ALL APPLICABLE CODES AND STANDARDS.
- ALL PRE-ENGINEERED TRUSSES TO BE DESIGNED BY CERTIFIED TRUSS MANUFACTURER.
- ALL FLOOR JOIST AS PER APPROVED TJ SYSTEM.
- ALL FOUNDATION WALLS TO BE POURED CONC (SEE PLAN FOR THICKNESS).
- FLOOR JOIST:
 - ALL PRE-ENGINEERED JOIST TO BE DESIGNED BY CERTIFIED JOIST MANUFACTURER.
 - CONTRACTOR TO FOLLOW PLANS AND SPECIFICATIONS DRAWN AND PROVIDED BY THE CERTIFIED JOIST MANUFACTURER.
- UNLESS NOTED OTHERWISE, PROVIDE THE FOLLOWING JAMB STUDS AT EACH SIDE OF BEARING WALL OPENINGS:
 - 0-3' SPAN: (1) JACK STUD, (1) KING STUD.
 - 3'-1'-6"-0" SPAN: (2) JACK STUDS, (1) KING AT INTERIOR WALLS, (2) KING STUDS AT EXTERIOR WALLS.
 - 6'-1'-9"-0" SPAN: 4 x 4" JACK POST, (2) KING STUDS.
- ALL POSTS, DOUBLE STUDS, ETC. ARE TO CONTINUE TO FOUNDATION OR TO BE SUPPORTED BY FLOOR BEAMS (GIRDERS) MEETING MANUFACTURERS SPECIFICATIONS AND LOCAL CODES.
- BEAMS:
 - ALL BEAMS BY: GEORGIA PACIFIC
- 2015 IECC RESIDENTIAL ENERGY REQUIREMENTS - HOWARD COUNTY
- MANDATORY REQUIREMENTS:
 - SECTION R401.3 CERTIFICATE
 - SECTION R402.4 AIR LEAKAGE
 - SECTION R402.5 MAXIMUM FENESTRATION U-FACTOR AND SHGC
 - SECTION R403.1 HVAC CONTROLS
 - SECTION R403.1.2 HEAT PUMP SUPPLEMENTARY HEAT
 - SECTION R403.2.2 DUCT SEALING
 - SECTION R403.2.3 BUILDING CAVITIES AS DUCTS OR PLENUMS
 - SECTION R403.3 MECHANICAL SYSTEM PIPING INSULATION
 - SECTION R403.4.1 CIRCULATING HOT WATER SYSTEMS
 - SECTION R403.5 MECHANICAL VENTILATION
 - SECTION R403.6 EQUIPMENT SIZING
 - SECTION R403.7 SYSTEMS SERVING MULTIPLE DWELLING UNITS
 - SECTION R403.8 SNOW MELT SYSTEMS CONTROLS
 - SECTION R403.9 POOLS AND INGROUND PERMANENTLY INSTALLED SPAS
 - SECTION R404.1 LIGHTING EQUIPMENT
 - SECTION R404.1.1 FUEL GAS LIGHTING EQUIPMENT
- PLUS THE PRESCRIPTIVE OR PERFORMANCE PROVISIONS
- PRESCRIPTIVE REQUIREMENTS:
 - SECTION R402.1 GENERAL
 - SECTION R402.2 SPECIFIC INSULATION REQUIREMENTS
 - SECTION R402.3 FENESTRATION
 - SECTION R403.2.1 DUCT INSULATION
 - SECTION R403.4.2 HOT WATER PIPE INSULATION
- PERFORMANCE REQUIREMENTS:
 - SECTION R405 SIMULATED PERFORMANCE ALTERNATIVE

REVISED DATE: 07-13-2017

DRAWN BY:
MARK J. BANDY, INC.
410-750-2262
DATE: 04-27-2017

STIRLING HOMES & DEVOPMENT, LLC.
20901 NEW HAMPSHIRE AVE.
BROOKVILLE, MD 20833

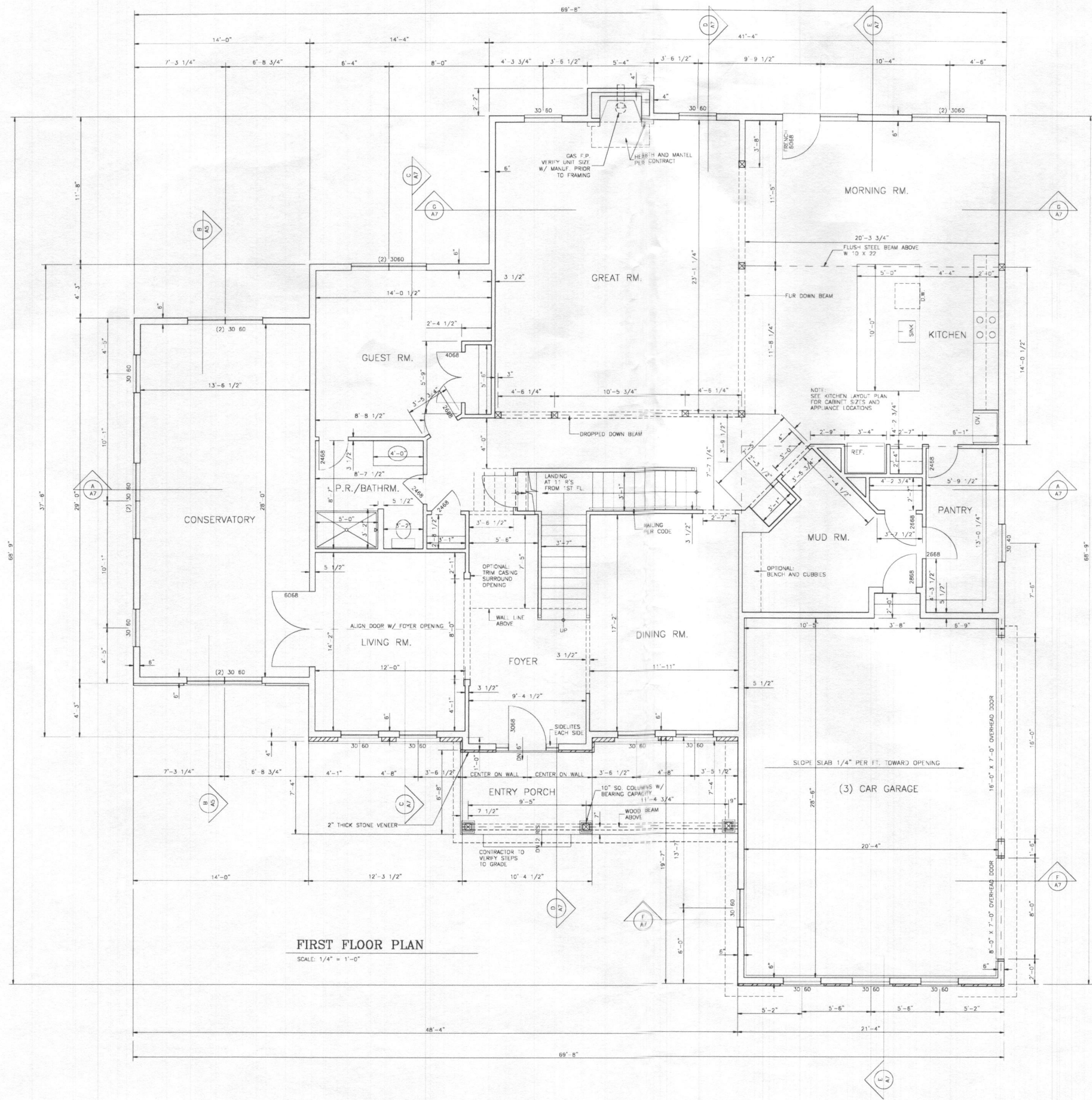
The Goh Residence
lot-3

BASEMENT LAYOUT/
FOUNDATION PLAN

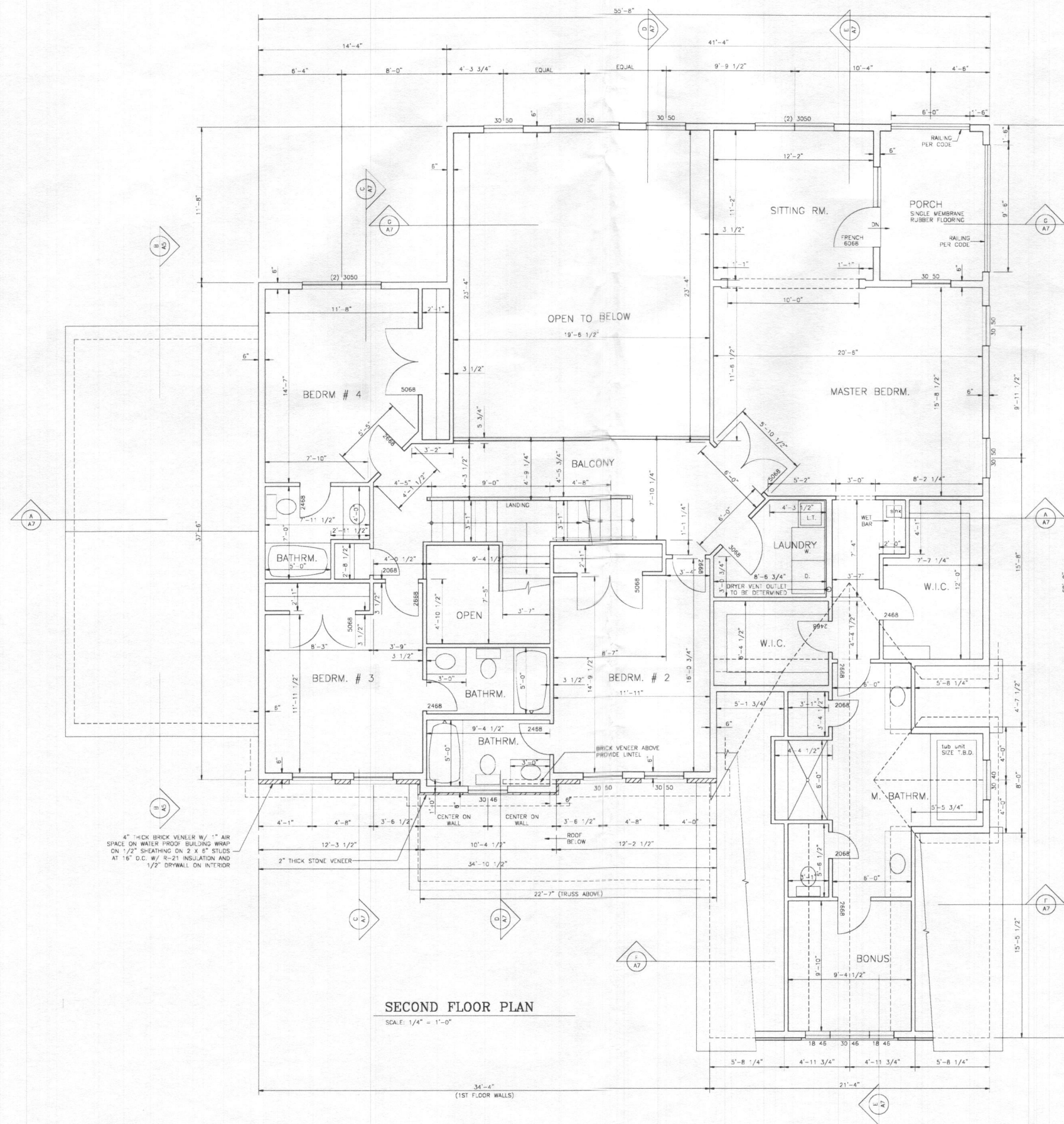
SCALE: 1/4" = 1'-0"

A1

HEALTH DEPT



A2	FIRST FLOOR PLAN	The Goh Residence lot-3	REVISED DATE: 07-13-2017	STIRLING HOMES & DEVOPMENT, LLC.	
				DRAWN BY: MARK J. BANDY, INC. 410-750-2262 DATE: 04-27-2017	



REVISÉD DATE: 07-13-2017

DRAWN BY:
MARK J. BANDY, INC.
410-750-2262
DATE: 04-27-2017

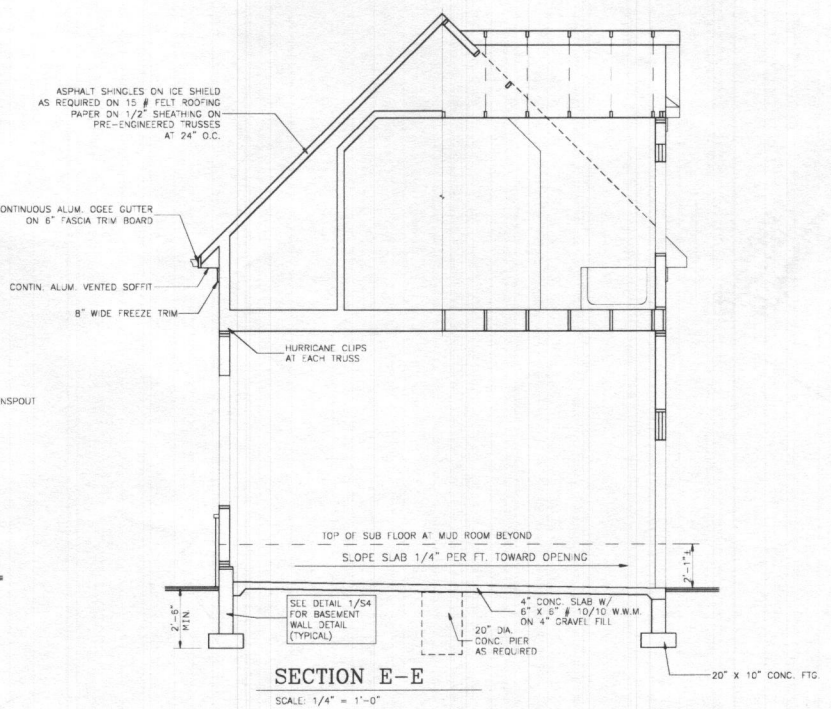
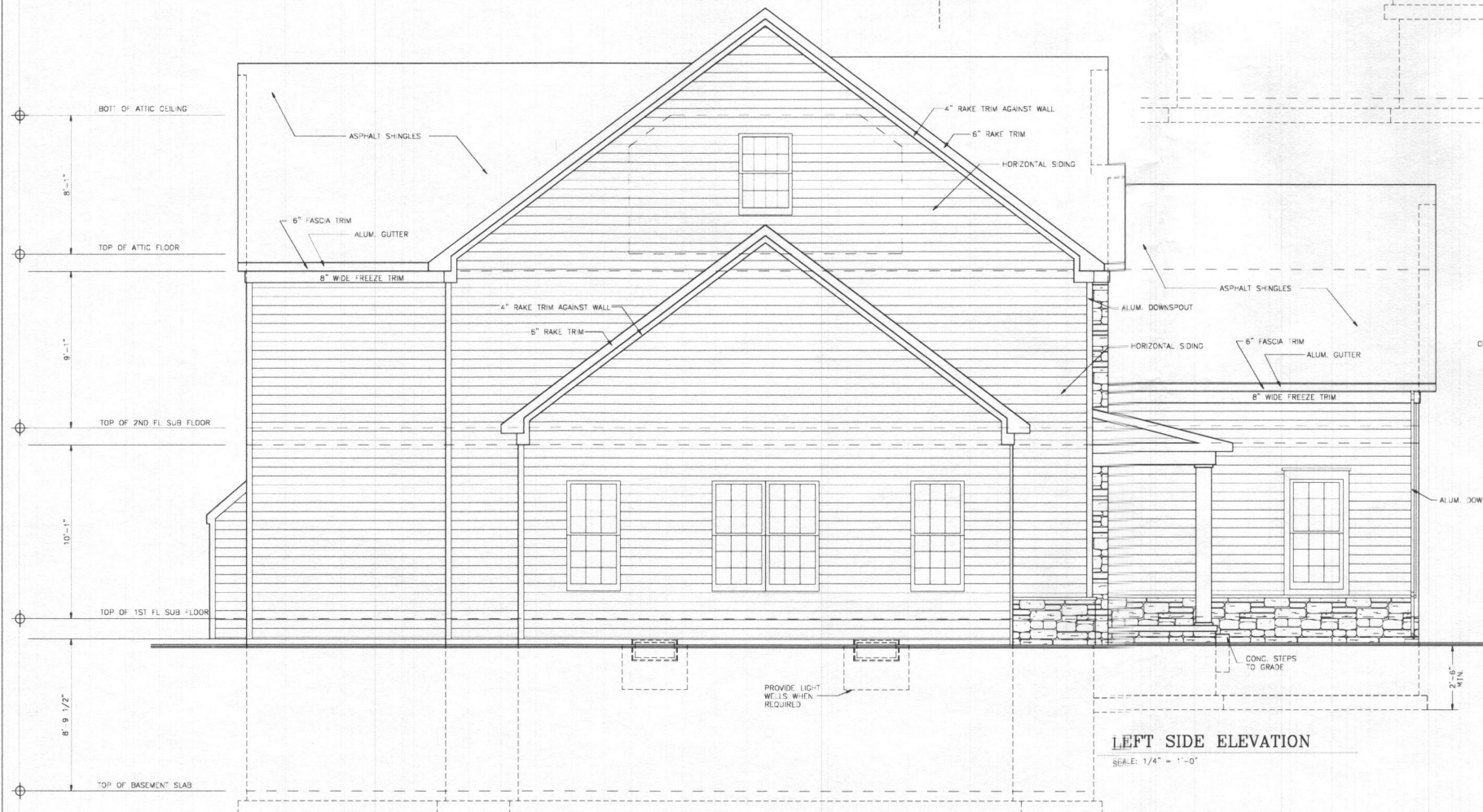
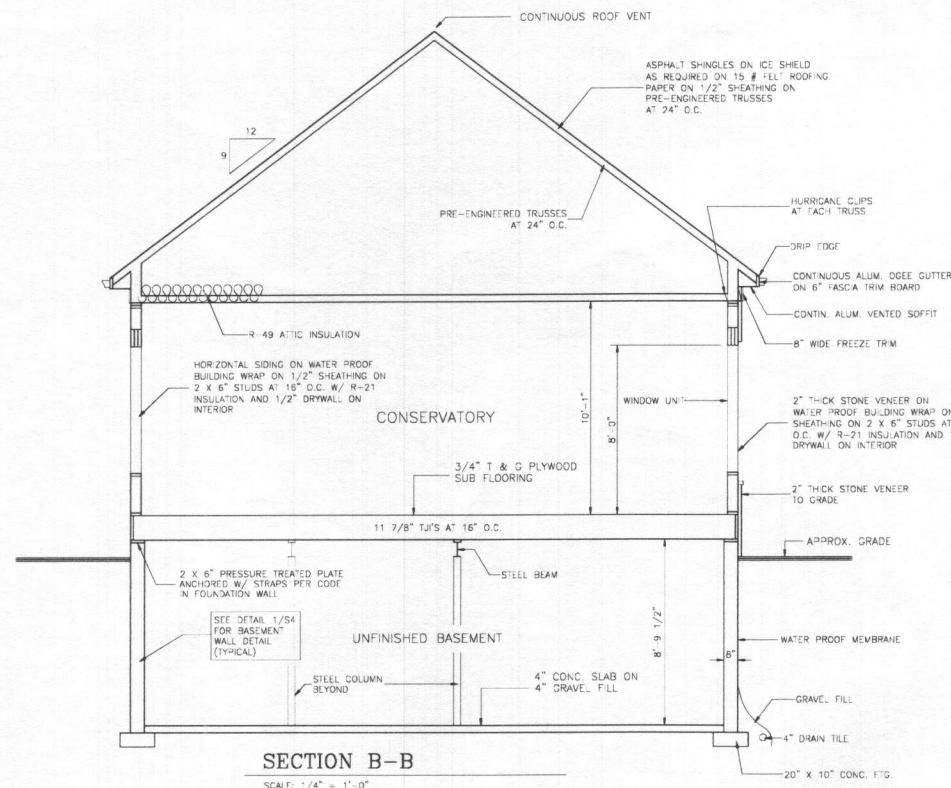
STIRLING HOMES & DEVOPMENT, LLC.
20901 NEW HAMPSHIRE AVE.
BROKEVILLE, MD 20833

The Goh Residence
lot-3

SECOND FLOOR PLAN

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

A3



REVISED DATE: 07-13-2017
DRAWN BY: MARK J. BANDY, INC.
410-750-2262
DATE: 04-27-2017

STIRLING HOMES & DEVELOPMENT, LLC.
20901 NEW HAMPSHIRE AVE.
BROOKVILLE, MD 20833

The Goh Residence
lot-3.

ELEVATIONS

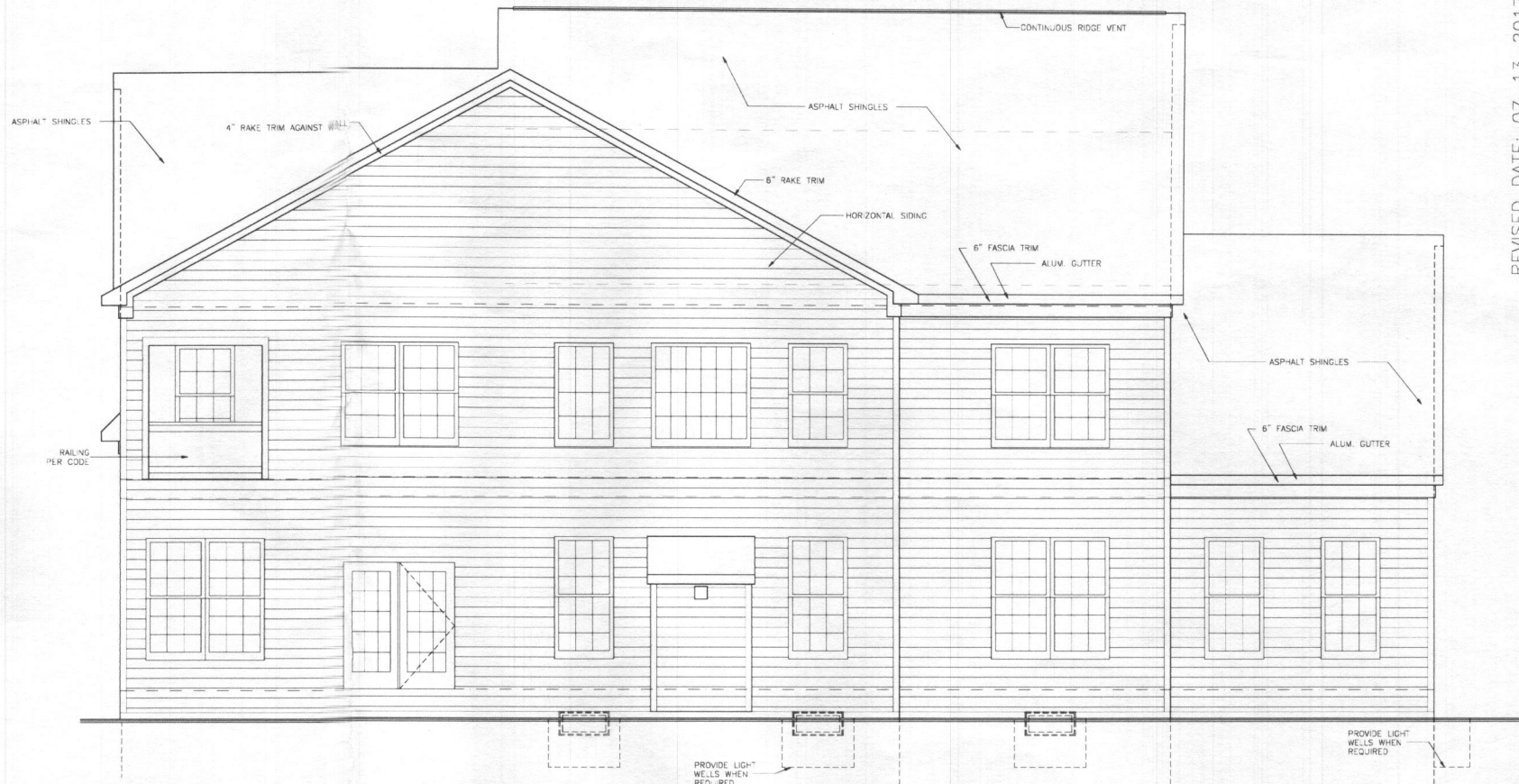
SCALE: 1/4" = 1'-0"

A5



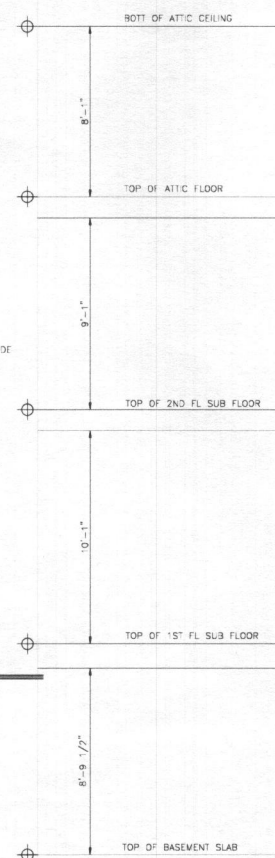
RIGHT SIDE ELEVATION

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



REAR ELEVATION

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



REVISED DATE: 07-13-2017

DRAWN BY:
MARK J. BANDY, INC.
410-750-2262
DATE: 04-27-2017

STIRLING HOMES & DEVOPMENT, LLC.

20801 NEW HAMPSHIRE AVE.
BROOKVILLE, MD 20833

The Goh Residence
lot-3

ELEVATIONS

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

A6

