

PERMIT NUMBER: B

20003888

DATE ACCEPTED:

RECEIVED

OCT 27 2020

| COMMERCIAL BUILDING PERMIT APPLICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                                                                                                                                          |                                            | LICENSES & PERMITS DIVISION                                                                           |                              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------|
| HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| 3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| www.howardcountymd.gov                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| <b>BUILDING SITE ADDRESS REQUIRED</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Street Address: <b>13850 Triadelphia Mill Road</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                         |                                                                                                                                                          |                                            | Unit:                                                                                                 |                              |
| City: <b>Dayton</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                         | State: <b>MD</b>                                                                                                                                         |                                            | Zip Code: <b>21036</b>                                                                                |                              |
| Subdivision/Village/Complex Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                         |                                                                                                                                                          |                                            | SDP/WP/BA #:                                                                                          |                              |
| Lot: <b>10</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Tax Map: <b>0019</b>                    | Parcel: <b>0300</b>                                                                                                                                      | Grading Permit #:                          |                                                                                                       |                              |
| <b>DESCRIPTION OF WORK REQUIRED</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Existing Use: <b>NA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                         | Proposed Use: <b>Storage building</b>                                                                                                                    |                                            | Estimated Cost: <b>\$16,200</b>                                                                       |                              |
| Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None                                                                                                                                                                                                                                                                                                                       |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Install a 50'x22' pole building on a 50'x22' concrete slab which will be to the left of the house 31' off the left property line and 120' off the street (front property line).                                                                                                                                                                                                                                                                                                                                               |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| <b>PROPERTY OWNER INFORMATION REQUIRED</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Owner(s) Name(s) (As it appears on tax records): <b>Nutter Scott W and Nutter Deborah</b>                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Owner's Street Address: <b>13850 Triadelphia Mill Road</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| City: <b>Dayton</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                         | State: <b>MD</b>                                                                                                                                         |                                            | Zip Code: <b>21036</b>                                                                                |                              |
| Phone: <b>(410) 599-6464</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                         | Email: <b>pro_lawn_care@hotmail.com</b>                                                                                                                  |                                            |                                                                                                       |                              |
| <b>TENANT INFORMATION REQUIRED</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Business Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         | Contact Name:                                                                                                                                            |                                            |                                                                                                       |                              |
| Street Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| City:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         | State:                                                                                                                                                   |                                            | Zip Code:                                                                                             |                              |
| Phone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         | Email:                                                                                                                                                   |                                            |                                                                                                       |                              |
| <b>APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Business Name: <b>Pro Lawn Care, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                         | Contact Name: <b>Lisa Bohr</b>                                                                                                                           |                                            |                                                                                                       |                              |
| Street Address: <b>13850 Triadelphia Mill Road</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| City: <b>Dayton</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                         | State: <b>MD</b>                                                                                                                                         |                                            | Zip Code: <b>21036</b>                                                                                |                              |
| Phone: <b>(410) 940-9664</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                         | Email: <b>pro_lawn_care2@hotmail.com</b>                                                                                                                 |                                            |                                                                                                       |                              |
| <b>CONTRACTOR INFORMATION REQUIRED</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Business Name: <b>New Team Carports LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Licensee's Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                         | License #: <b>110409</b>                                                                                                                                 |                                            |                                                                                                       |                              |
| Street Address: <b>130 Cone Lane</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| City: <b>Mount Airy</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                         | State: <b>NC</b>                                                                                                                                         |                                            | Zip Code: <b>27030</b>                                                                                |                              |
| Phone: <b>(336) 776-0816</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                         | Email: <b>sales@newteamcarport.com</b>                                                                                                                   |                                            |                                                                                                       |                              |
| <b>ARCHITECT/ENGINEER INFORMATION REQUIRED - INDIVIDUAL WHO SIGNED PLANS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Business Name: <b>Moore and Associates Engineering</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         | Name:                                                                                                                                                    |                                            |                                                                                                       |                              |
| Street Address: <b>1009 East Avenue</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| City: <b>North Augusta</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                         | State: <b>SC</b>                                                                                                                                         |                                            | Zip Code: <b>27030</b>                                                                                |                              |
| Phone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         | Email:                                                                                                                                                   |                                            |                                                                                                       |                              |
| <b>BUILDING CHARACTERISTICS (PLEASE SELECT/COMPLETE ALL THAT APPLY)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Utilities: <input type="checkbox"/> Electric <input type="checkbox"/> Gas                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                         | Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Well)                                                         |                                            | Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Septic) |                              |
| Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other:                                                                                                                                                                                                                                                                                                                                                                       |                                         | Roadside Tree Project: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes: #                                                            |                                            |                                                                                                       |                              |
| Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input checked="" type="checkbox"/> None                                                                                                                                                                                                                                                                                                                                                                                                 |                                         | Fire Alarm System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Voice Evac                               |                                            |                                                                                                       |                              |
| <b>ADDITIONAL COMMERCIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| Area of Construction: <b>1,220</b> sq ft                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                         | Gross Area: <b>12,200</b> sq ft                                                                                                                          |                                            | Height: <b>8</b> ft # of Stories: <b>1</b>                                                            |                              |
| Construction Classification(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                         | Use Group:                                                                                                                                               |                                            |                                                                                                       |                              |
| Was the tenant space previously occupied? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         | Shell Building Permit # (for interior completions):                                                                                                      |                                            |                                                                                                       |                              |
| <b>ADDITIONAL MULTI-FAMILY INFORMATION IF APPLICABLE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| # of efficiency units (MF):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                         | # of 1 BR (MF):                                                                                                                                          |                                            | # of 2 BR (MF):                                                                                       |                              |
| # of 3 BR (MF):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                         | Energy Method: <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI <input type="checkbox"/> A 90.1 |                                            | Gross Area: sq ft Occupiable Area: sq ft                                                              |                              |
| <b>AGREEMENT/ DISCALIMER REQUIRED</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 ORIGINAL SIGNATURE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         | DATE SIGNED                                                                                                                                              |                                            |                                                                                                       |                              |
| FOR OFFICE USE ONLY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                         | CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY                                                                                                  |                                            |                                                                                                       |                              |
| AGENCIES REQUIRED/APPROVALS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                         |                                                                                                                                                          |                                            |                                                                                                       |                              |
| <input checked="" type="checkbox"/> PR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input checked="" type="checkbox"/> DPZ | <input checked="" type="checkbox"/> DED                                                                                                                  | <input checked="" type="checkbox"/> Health | <input type="checkbox"/> SHA                                                                          | <input type="checkbox"/> CID |
| SUBMITTAL FEES:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                         | PAYMENT:                                                                                                                                                 |                                            | ACCEPTED BY:                                                                                          |                              |



# NEW TEAM CARPORTS LLC

PO ORDER **770**

130 Cone Ln. Mount Airy NC 27030

Tel. (336) 776-0816 & (518) 300-3730

Business Hours 8:30 am to 5:00 pm Eastern Time

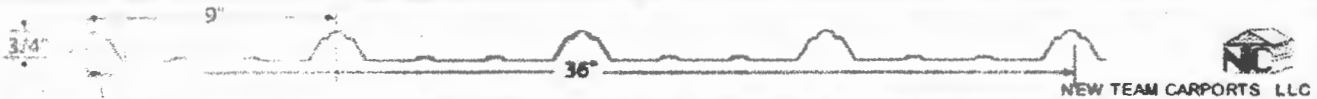
@ntccarport

@Ntc\_carport

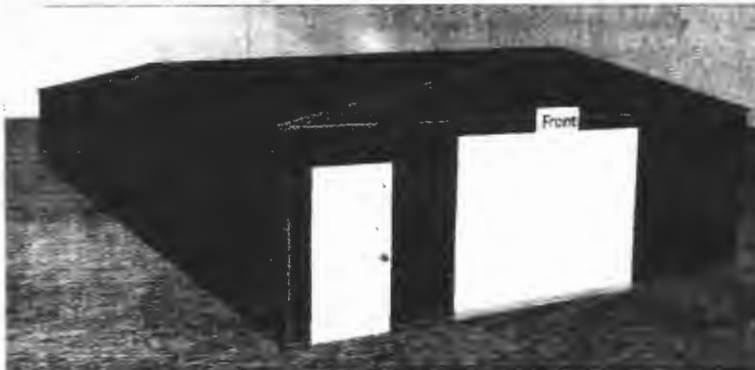
ntc.carports

Customer's Name: **DAVID NUTTER**

| Unit Size: |     |        |     | Base Rail Dimensions: |   |       |     | Gauge       |   | Roof Style |      |         | Certified Unit |          |        |
|------------|-----|--------|-----|-----------------------|---|-------|-----|-------------|---|------------|------|---------|----------------|----------|--------|
| 22         | ' X | 51     | ' X | 8                     | ' | 22    | ' X | 50          | ' | XX         |      |         | XX             | 140/30   |        |
| WIDTH      |     | LENGHT |     | HEIGHT                |   | WIDTH |     | LENGHT      |   | 14 G       | 12 G | REGULAR | BOX EVE        | VERTICAL | YES NO |
| COLORS:    |     | ROOF   |     | SIDES                 |   | ENDS  |     | WAINSCOTING |   | TRIM       |      |         |                |          |        |
|            |     | GREEN  |     | GREEN                 |   | GREEN |     |             |   | GREEN      |      |         |                |          |        |



- BARN RED
- EARTH BROWN
- RAWHIDE / TAN
- SANDSTONE
- QUAKER GRAY
- BURNISHED SLATE
- CLAY
- SLATE BLUE
- BLACK
- EVERGREEN
- PEWTER GRAY
- BURGANDY
- PEBBLE BEIGE



**RECEIVED**

OCT 21 2020

LICENSES & PERMITS  
DIVISION



## ADDITIONAL NOTES

FRONT- 1 Garage door (9'x8') centered with header seal. 1 Walking door (36"x80") 2' from left corner, open out. BACK SIDE- 1 Garage door (9'x8') Centered.

DATE: 27/10/2020

MADE BY: LUIS G.

I agree the building (s), carport (s), playset (s) or metal structure (s) is structurally sound and I am satisfied with it

Customer's Signature

Date

Installer's Signature

Date



David Nutter  
13850 Triadelphia Mill Rd  
Dayton MD 21036

## STRUCTURAL DESIGN

### ENCLOSED BUILDING

MAXIMUM 32'-0" WIDE X 22'-0" EAVE HEIGHT  
BOX EAVE FRAME AND BOW FRAME

18 April 2019

Revision 1

M&A Project No. 172606/17292S/18254S/19039S

Prepared for:

Carport Central, Inc.  
737 South Main Street  
Mt. Airy, NC 27030

Prepared by:

Moore and Associates Engineering and Consulting, Inc.

1009 East Avenue  
North Augusta, SC 29841

401 S. Main Street, Suite 200  
Mt. Airy, NC 27030

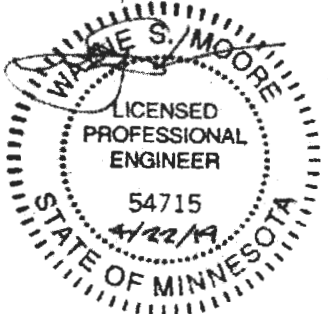
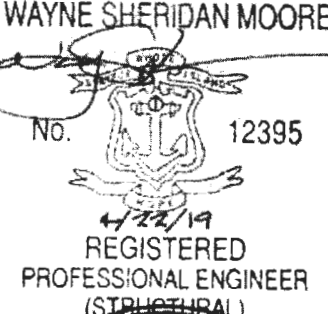
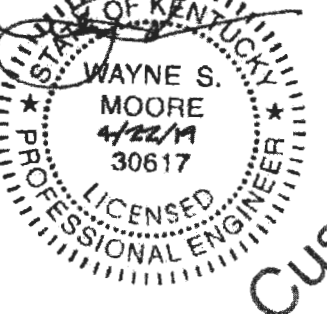
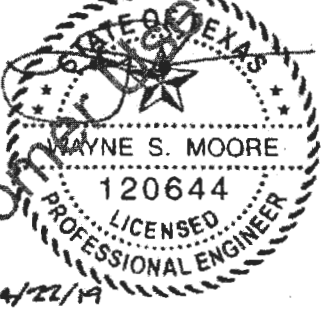
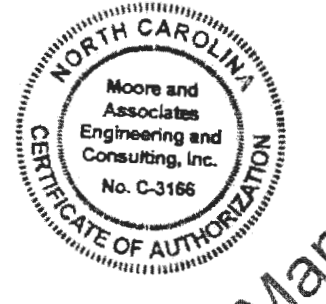
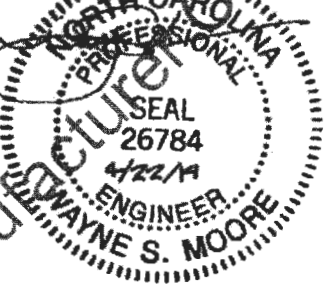
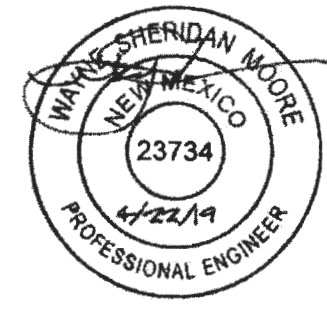
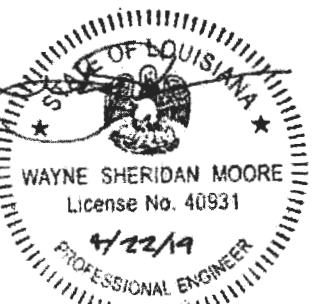


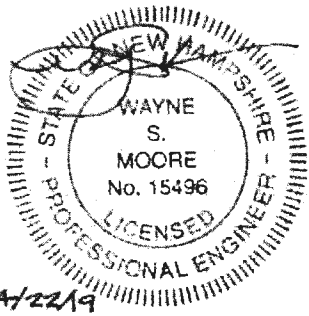
MOORE AND ASSOCIATES  
ENGINEERING AND CONSULTING

RECEIVED

OCT 27 2020

LICENSES & PERMITS  
DIVISION

|                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                             |                                                                                                           |                                                                                                                                               |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                 | <p>I hereby certify that this plan, specification, or report was prepared by me or under my direct supervision and that I am a duly Licensed Professional Engineer under the laws of the state of Minnesota.</p> <p>Signature: <u>[Signature]</u></p> <p>Typed or Printed Name: <u>WAYNE S. MOORE</u></p> <p>Date: <u>4/22/19</u> License Number: <u>54715</u></p> |                                                                                                                                                          |                                                                                                           |                                                                                                                                               |
|                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                   |                                                                                                                                                           |                        |                                                                                                                                               |
|                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                  |                                                                                                                                                          |                       |                                                                                                                                               |
|                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                 |                                                                                                                                                         |                      |                                                                                                                                               |
|                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                 | <p>I HAVE RESEARCHED THIS CHAPTER AND THE LOUISIANA STATE UNIFORM CONSTRUCTION CODE AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THESE DRAWINGS ARE IN COMPLIANCE THEREWITH. I TAKE FULL RESPONSIBILITY FOR THE CONTENTS OF THESE PLANS.</p> | <p><b>RECEIVED</b></p> <p>OCT 27 2020</p>                                                                 |                                                                                                                                               |
| <p><b>MOORE AND ASSOCIATES<br/>ENGINEERING AND CONSULTING, INC.</b></p> <p>THIS DOCUMENT IS THE PROPERTY OF MOORE AND ASSOCIATES ENGINEERING AND CONSULTING. THE UNAUTHORIZED REPRODUCTION, COPYING, OR OTHERWISE USE OF THIS DOCUMENT IS STRICTLY PROHIBITED AND ANY INFRINGEMENT THEREUPON MAY BE SUBJECT TO LEGAL ACTION.</p> |                                                                                                                                                                                                                                                                                                                                                                    | <p>DRAWN BY: SLH</p> <p>CHECKED BY: PDH</p> <p>PROJECT MGR: VSM</p> <p>CLIENT: CARPORT CENTRAL</p>                                                                                                                                          | <p>David Nutter<br/>13850 Triadelphia Mill Rd<br/>Dayton MD 21036</p> <p>DATE: 4-18-19</p> <p>SHT. 1A</p> | <p>LICENSES &amp; PERMITS<br/>DIVISION</p> <p>JOB NO 17260S/<br/>17292S/18234S/19029S</p> <p>SCALE: NTS</p> <p>DWG. NO SK-3</p> <p>REV: 3</p> |



4/22/19

RECEIVED

OCT 27 2020

LICENSES &amp; PERMITS

MOORE AND ASSOCIATES  
ENGINEERING AND CONSULTING, INC.

DRAWN BY: SLH

CHECKED BY: PSH

David Nutter  
13850 Triadelphia Mill Rd  
Dayton MD 21036

DIVISION

THIS DOCUMENT IS THE PROPERTY OF MOORE AND ASSOCIATES ENGINEERING AND CONSULTING. THE UNAUTHORIZED REPRODUCTION, COPYING, OR OTHERWISE USE OF THIS DOCUMENT IS STRICTLY PROHIBITED AND ANY INFRINGEMENT THEREUPON MAY BE SUBJECT TO LEGAL ACTION.

PROJECT NO: VSH

CLIENT: CARPORT CENTRAL

DATE: 4-18-19

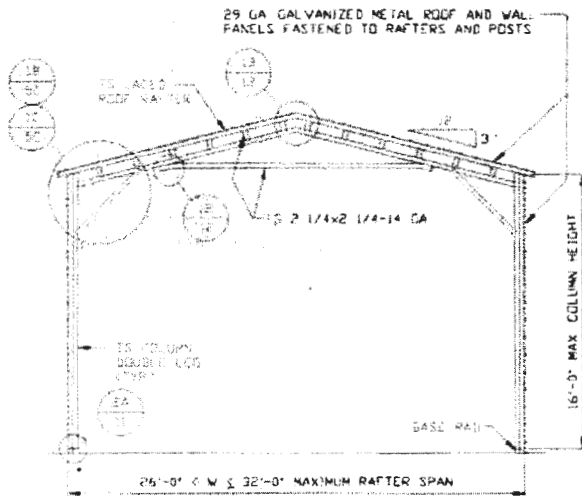
SHT. 1B

SCALE: NTS

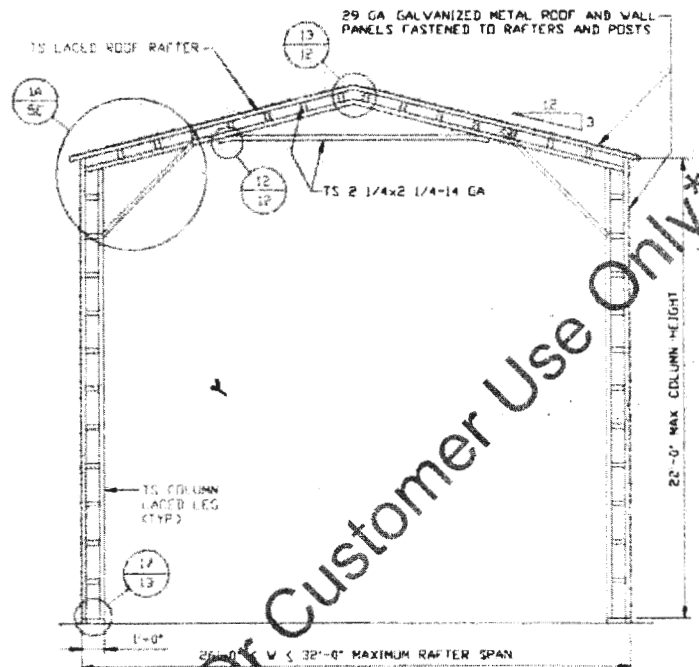
DWG. NO SK-3

JOB NO 172603/  
172603/182545/190395

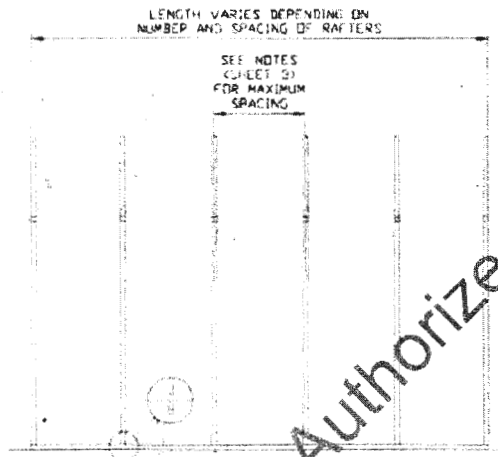
REV. 3

**EXPOSURE B**

**TYPICAL RAFTER/COLUMN END FRAME SECTION**  
SCALE: NTS



**TYPICAL RAFTER/COLUMN END FRAME SECTION**  
SCALE: NTS



**TYPICAL RAFTER/COLUMN END FRAME SECTION**  
SCALE: NTS

**RECEIVED**

OCT 27 2020

LICENSES & PERMITS  
DIVISION

**MOORE AND ASSOCIATES  
ENGINEERING AND CONSULTING, INC.**

DRAWN BY: SLH

David Nutter  
13850 Triadelphia Mill Rd  
Dayton MD 21036

CHECKED BY: PBH

PROJECT MGR: VSM

DATE: 4-18-19

SCALE: NTS

JOB NO: 17260S/  
17292S/18254S/19039S

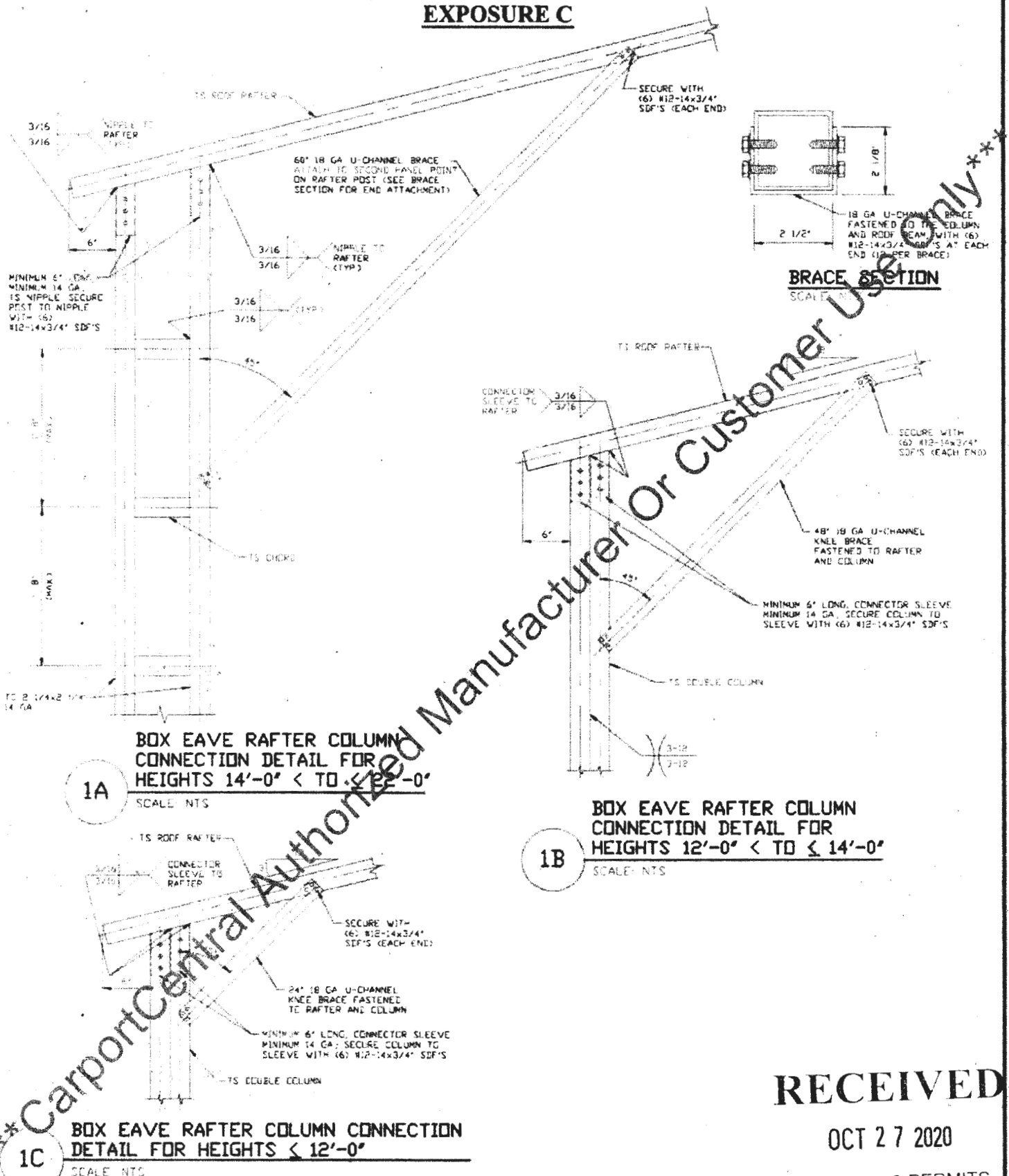
CLIENT: CARPORT  
CENTRAL

SHT. 4D

DWG. NO SK-3

REV. 3

THIS DOCUMENT IS THE PROPERTY OF MOORE AND ASSOCIATES ENGINEERING AND CONSULTING. THE UNAUTHORIZED REPRODUCTION, COPYING, OR OTHERWISE USE OF THIS DOCUMENT IS STRICTLY PROHIBITED AND ANY INFRINGEMENT THEREUPON MAY BE SUBJECT TO LEGAL ACTION.

**EXPOSURE C****RECEIVED**

OCT 27 2020

LICENSES &amp; PERMITS

**MOORE AND ASSOCIATES  
ENGINEERING AND CONSULTING, INC.**

DRAWN BY: SLH

CHECKED BY: PDH

PROJECT NO: VSM

CLIENT: CARPORT  
CENTRAL

David Nutter  
13850 Triadelphia Mill Rd  
Dayton MD 21036

DATE: 4-18-19

SHT. 5D

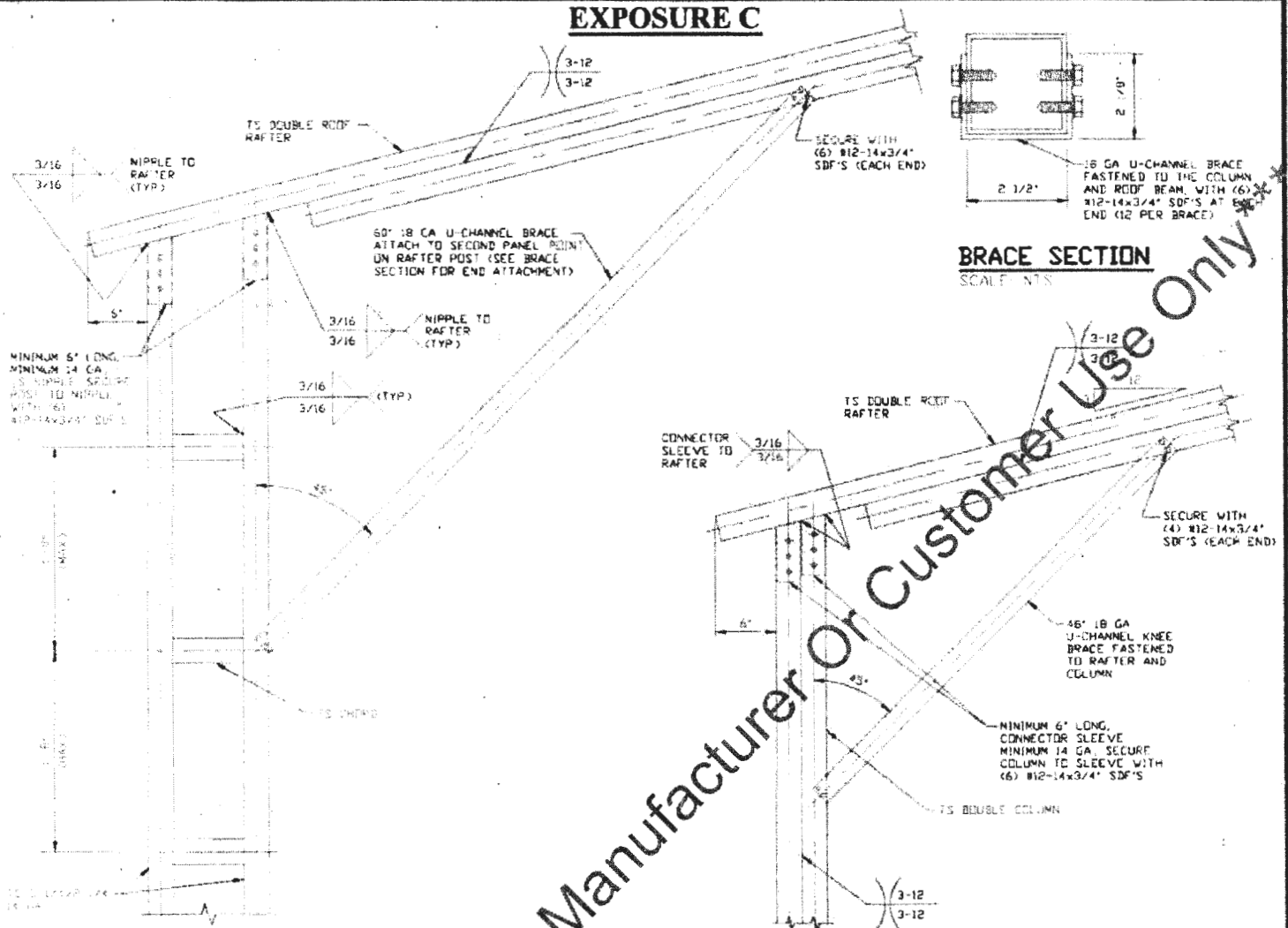
SCALE: NTS

DWG. NO: SK-3

JOB NO: 17260S/  
17292S/18234S/19039S

REV: 3

THIS DOCUMENT IS THE PROPERTY OF MOORE AND ASSOCIATES ENGINEERING AND CONSULTING. THE UNAUTHORIZED REPRODUCTION, COPYING, OR OTHERWISE USE OF THIS DOCUMENT IS STRICTLY PROHIBITED AND ANY INFRINGEMENT THEREUPON MAY BE SUBJECT TO LEGAL ACTION.

**EXPOSURE C**

**BOX EAVE RAFTER COLUMN CONNECTION DETAIL FOR HEIGHT 14'-0" < W ≤ 22'-0"**

1A

SCALE: NTS

**BOX EAVE RAFTER COLUMN CONNECTION DETAIL FOR HEIGHT 12'-0" < W ≤ 14'-0"**

1B

SCALE: NTS

**BOX EAVE RAFTER COLUMN CONNECTION DETAIL FOR HEIGHT ≤ 12'-0"**

1C

SCALE: NTS

**MOORE AND ASSOCIATES  
ENGINEERING AND CONSULTING, INC.**

DRAWN BY: SLH

David Nutter  
13850 Triadelphia Mill Rd  
Dayton MD 21036

CHECKED BY: PSH

PROJECT MGR: VSM

DATE: 4-18-19

SCALE: NTS

JOB NO: 17260S/  
17292S/18254S/19039S

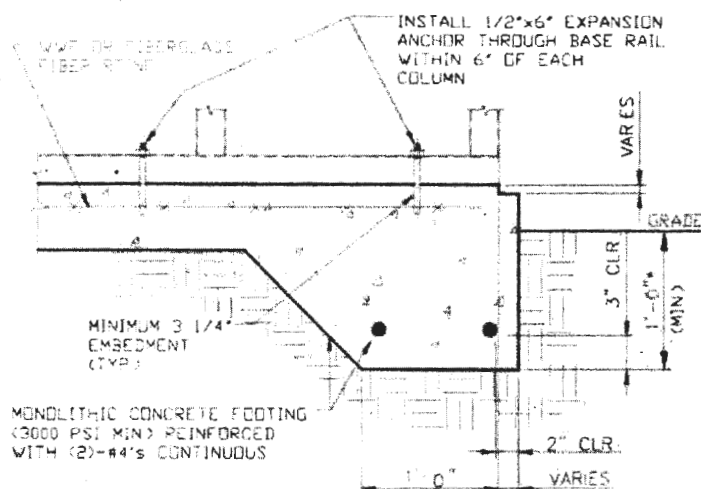
CLIENT: CARPORT  
CENTRAL

SHT. 5E

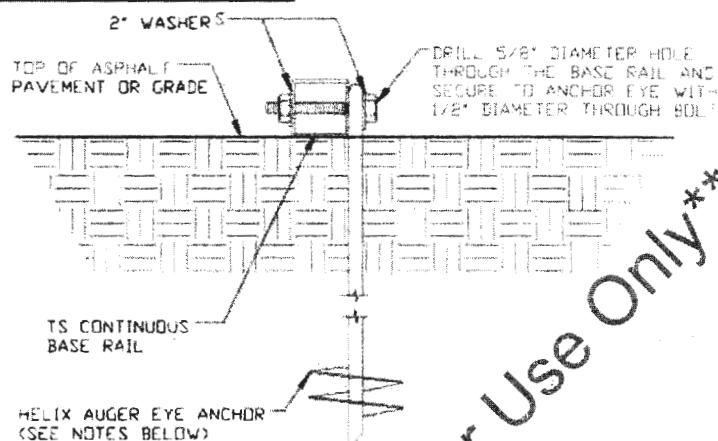
DWG. NO: SK-3

REV: 3

THIS DOCUMENT IS THE PROPERTY OF MOORE AND ASSOCIATES ENGINEERING AND CONSULTING. THE UNAUTHORIZED REPRODUCTION, COPYING, OR OTHERWISE USE OF THIS DOCUMENT IS STRICTLY PROHIBITED AND ANY INFRINGEMENT THEREUPON MAY BE SUBJECT TO LEGAL ACTION.

**BASE RAIL ANCHORAGE OPTIONS****3A****CONCRETE MONOLITHIC SLAB  
BASE RAIL ANCHORAGE**

SCALE: NTS  
(MINIMUM ANCHOR EDGE DISTANCE IS 4")  
COORDINATE WITH LOCAL CODES/ORD.

**3B****HELICAL AUGER ANCHORAGE**

SCALE: NTS CAN BE USED FOR ASPHALT

**GENERAL NOTES**

NOTE: CONCRETE MONOLITHIC SLAB DESIGN BASED ON  
MINIMUM SOIL BEARING CAPACITY OF 1500 PSF

**CONCRETE:**

CONCRETE SHALL HAVE A MINIMUM SPECIFIED COMPRESSIVE  
STRENGTH OF 3,000 PSI AT 28 DAYS

**COVER OVER REINFORCING STEEL:**

FOR FOUNDATIONS, MINIMUM CONCRETE COVER OVER REINFORCING  
BARS SHALL BE PER ACI-318

3" IN FOUNDATIONS WHERE THE CONCRETE IS CAST AGAINST AND  
PERMANENTLY IN CONTACT WITH THE EARTH OR EXPOSED TO THE  
EARTH OR WEATHER, AND 1 1/2" ELSEWHERE

**REINFORCING STEEL:**

THE TURNDOWN REINFORCING STEEL SHALL BE ASTM A615 GRADE  
60. THE SLAB REINFORCEMENT SHALL BE WELDED WIRE FABRIC  
MEETING ASTM A185 OR FIBERGLASS FIBER REINFORCEMENT

**REINFORCEMENT MAY BE BENT IN THE  
SHOP OR THE FIELD PROVIDED:**

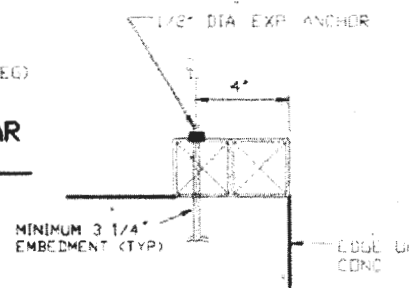
1. REINFORCEMENT IS BENT COLD
2. THE DIAMETER OF THE BEND, MEASURED ON THE INSIDE OF THE  
BAR, IS NOT LESS THAN SIX-BAR DIAMETERS
3. REINFORCEMENT PARTIALLY EMBEDDED IN CONCRETE SHALL NOT  
BE FIELD BENT

**HELICAL AUGER ANCHOR NOTES:**

1. FOR VERY DENSE AND/OR CEMENTED SANDS, COARSE GRAVEL  
AND COBBLES, CALICHE, PRELIMINARY SILTS AND CLAYS, USE  
MINIMUM (2) 4" HELICES WITH MINIMUM 30" EMBEDMENT OR  
SINGLE 6" HELIX WITH MINIMUM 50" EMBEDMENT
2. FOR COARSE, USE MINIMUM (2) 4" HELICES WITH MINIMUM  
30" EMBEDMENT OR SINGLE 6" HELIX WITH MINIMUM  
50" EMBEDMENT
3. FOR MEDIUM DENSE, COARSE SANDS, SANDY GRAVELS, VERY  
STIFF SILTS AND CLAYS, USE MINIMUM (2) 4" HELICES WITH  
MINIMUM 30" EMBEDMENT OR SINGLE 6" HELIX WITH MINIMUM  
50" EMBEDMENT
4. FOR LOOSE TO MEDIUM DENSE SANDS, FIRM TO STIFF CLAYS AND  
SILTS, ALLUVIAL FILL, USE MINIMUM (2) 6" HELICES WITH MINIMUM  
50" EMBEDMENT
5. FOR VERY LOOSE TO MEDIUM DENSE SANDS, FIRM TO STIFFER  
CLAYS AND SILTS, ALLUVIAL FILL, USE MINIMUM (2) 8" HELICES  
WITH MINIMUM 60" EMBEDMENT

**TYPICAL ANCHOR DETAIL  
WHEN BASE RAIL IS NEAR  
EDGE OF CONCRETE**

SCALE: NTS

**SECTION**

SCALE: NTS

**RECEIVED**

OCT 27 2020

LICENSES &amp; PERMITS

**MOORE AND ASSOCIATES  
ENGINEERING AND CONSULTING, INC.**

DRAWN BY: SLH

CHECKED BY: PDH

PROJECT NO: VSM

CLIENT: CARPORT  
CENTRAL

David Nutter  
13850 Triadelphia Mill Rd  
Dayton MD 21036

DATE: 4-18-19

SHT. 8A

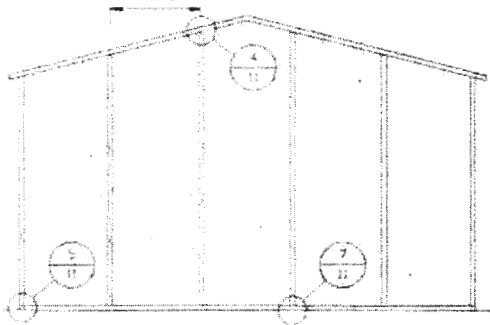
SCALE: NTS

DWG. NO. SK-3

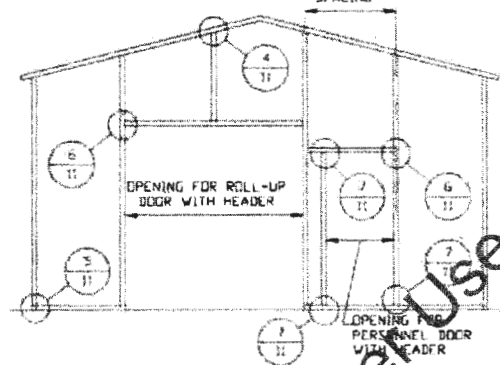
JOB NO. 17268S/  
17268S/18264S/18826S

REV: 3

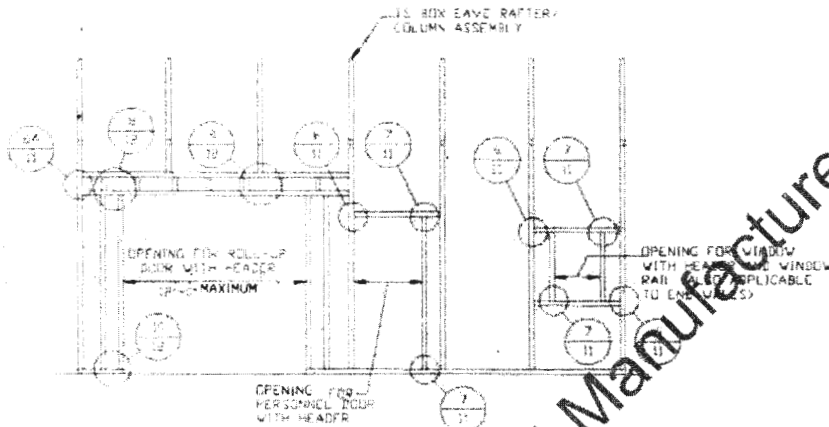
THIS DOCUMENT IS THE PROPERTY OF MOORE AND ASSOCIATES ENGINEERING AND  
CONSULTING. THE UNAUTHORIZED REPRODUCTION, COPYING, OR OTHERWISE USE OF  
THIS DOCUMENT IS STRICTLY PROHIBITED AND ANY INFRINGEMENT THEREUPON MAY  
BE SUBJECT TO LEGAL ACTION.

**BOX EAVE RAFTER END WALL AND SIDE WALL OPENINGS**SEE NOTES  
(SHEET 3)  
FOR MAXIMUM  
SPACING**TYPICAL BOX EAVE RAFTER  
END WALL FRAMING SECTION**

SCALE: NTS

SEE NOTES  
(SHEET 3)  
FOR MAXIMUM  
SPACING**TYPICAL BOX EAVE RAFTER  
END WALL OPENINGS FRAMING SECTION**

SCALE: NTS

**TYPICAL BOX EAVE RAFTER  
SIDE WALL OPENINGS FRAMING SECTION**

SCALE: NTS

**RECEIVED**

OCT 27 2020

LICENSES &amp; PERMITS

**MOORE AND ASSOCIATES  
ENGINEERING AND CONSULTING, INC.**

DRAWN BY: SLH

David Nutter  
13850 Triadelphia Mill Rd  
Dayton MD 21036

CHECKED BY: PDH

PROJECT MGR: VSH

DATE: 4-18-19

SCALE: NTS

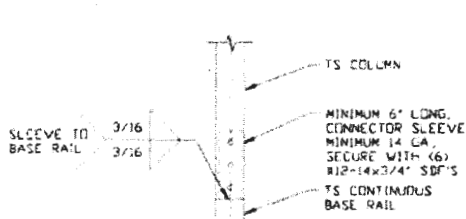
JOB NO: 17260S/  
17292S/18254S/19039SCLIENT: CARPORT  
CENTRAL

SHT. 9

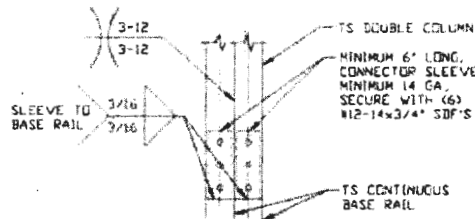
DWG. NO: SK-3

REV. 3

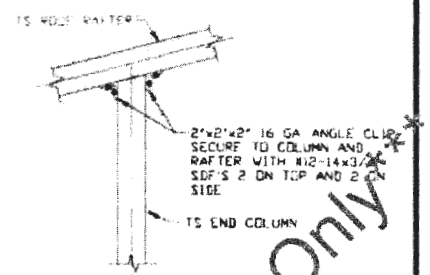
THIS DOCUMENT IS THE PROPERTY OF MOORE AND ASSOCIATES ENGINEERING AND CONSULTING. THE UNAUTHORIZED REPRODUCTION, COPYING, OR OTHERWISE USE OF THIS DOCUMENT IS STRICTLY PROHIBITED AND ANY INFRINGEMENT THEREUPON MAY BE SUBJECT TO LEGAL ACTION.

**BOW AND BOX EAVE RAFTER WALL OPENING DETAILS****2 Rafter Column/Base Rail Connection Detail**

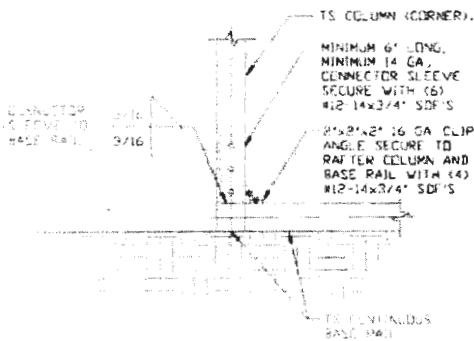
SCALE: NTS

**2A Rafter Column/Base Rail Connection Detail**

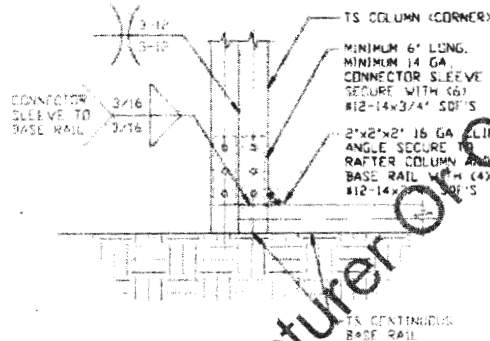
SCALE: NTS

**4 End Column/Rafter Connection Detail**

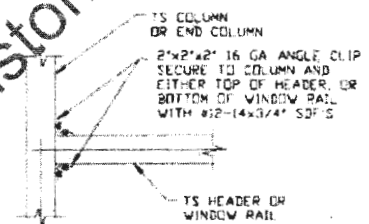
SCALE: NTS

**5 End Column/Base Rail Connection Detail**

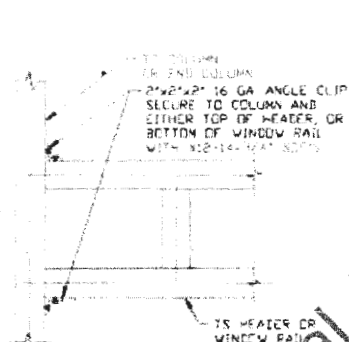
SCALE: NTS

**5A End Column/Base Rail Connection Detail**

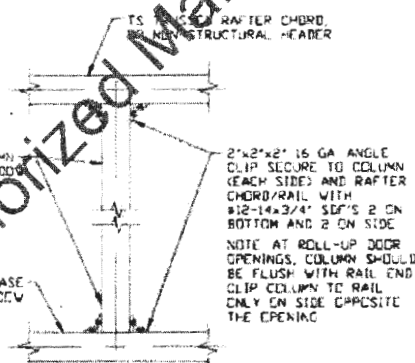
SCALE: NTS

**6 COLUMN OR WINDOW RAIL TO POST CONNECTION DETAIL**

SCALE: NTS

**6A COLUMN OR WINDOW RAIL TO POST CONNECTION DETAIL**

SCALE: NTS

**7 COLUMN TO HEADER, BASE RAIL, OR WINDOW RAIL CONNECTION DETAIL**

SCALE: NTS

**RECEIVED**

OCT 27 2020

**MOORE AND ASSOCIATES  
ENGINEERING AND CONSULTING, INC.**

DRAWN BY: SLH

CHECKED BY: PMH

PROJECT MGR: VSH

CLIENT: CARPORT  
CENTRALDavid Nutter  
13850 Triadelphia Mill Rd  
Dayton MD 21036LICENSES & PERMITS  
DIVISION

DATE: 4-18-19

SHT. 11

SCALE: NTS

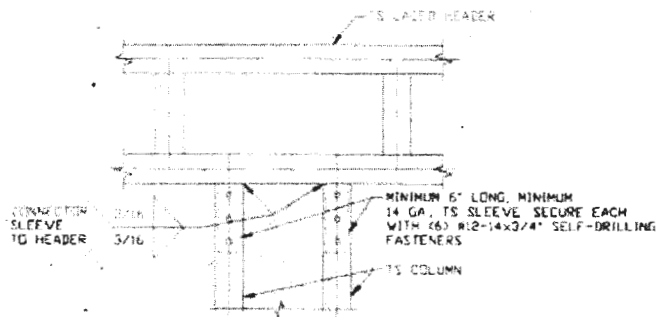
DWG. NO. SK-3

JOB NO. 17260S/  
17292S/18254S/19039S

REV. 3

THIS DOCUMENT IS THE PROPERTY OF MOORE AND ASSOCIATES ENGINEERING AND CONSULTING. THE UNAUTHORIZED REPRODUCTION, COPYING, OR OTHERWISE USE OF THIS DOCUMENT IS STRICTLY PROHIBITED AND ANY INFRINGEMENT THEREUPON MAY BE SUBJECT TO LEGAL ACTION.

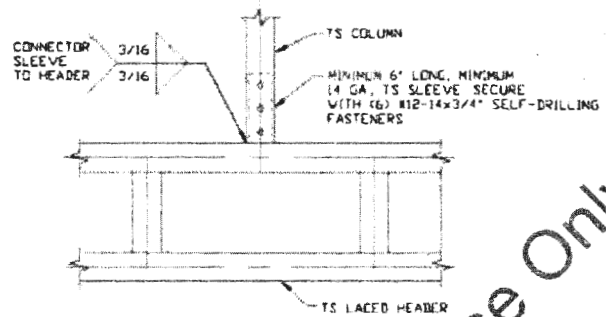
# BOW AND BOX EAVE RAFTER WALL OPENING DETAILS



8

## TRIPLE HEADER/COLUMN CONNECTION DETAIL

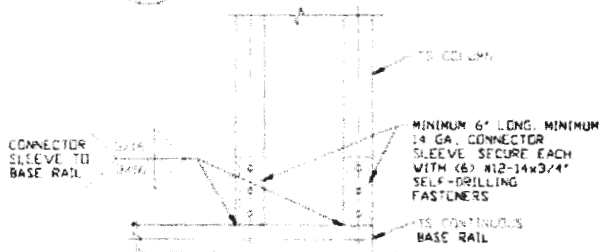
SCALE: NTS



9

## COLUMN/TRIPLE HEADER CONNECTION DETAIL

SCALE: NTS



10

## COLUMN/BASE RAIL CONNECTION DETAIL

SCALE: NTS



11

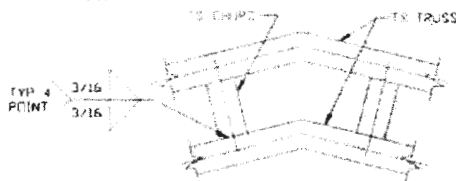
## RAFTER TO CHORD CONNECTION DETAIL

SCALE: NTS

12

## COLLAR TIE CONNECTION DETAIL

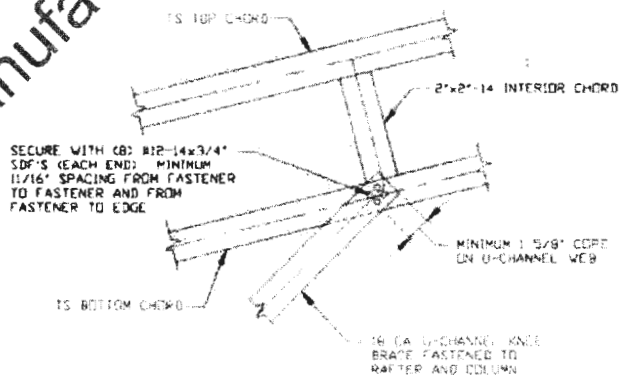
SCALE: NTS



13

## CHORD TO TRUSS CONNECTION DETAIL

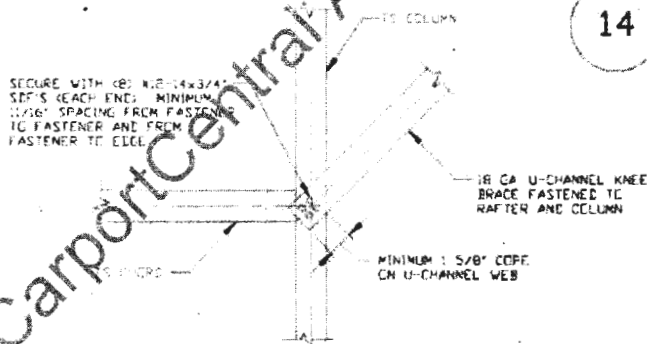
SCALE: NTS



14

## U-CHANNEL TO RAFTER CONNECTION DETAIL

SCALE: NTS



15

## U-CHANNEL TO COLUMN CONNECTION DETAIL

SCALE: NTS

# RECEIVED

OCT 27 2020

**MOORE AND ASSOCIATES  
ENGINEERING AND CONSULTING, INC.**

DRAWN BY: SLH

CHECKED BY: PDH

PROJECT NO: VSK

CLIENT: CARPORT  
CENTRAL

David Nutter  
13850 Triadelphia Mill Rd  
Dayton MD 21036

LICENSES & PERMITS  
DIVISION

DATE: 4-16-19

SHT. 12

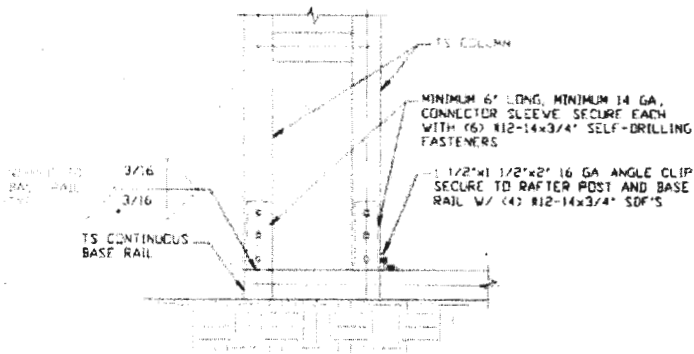
SCALE: NTS

DWG. NO: SK-3

JOB NO: 172605/  
172923/182345/190395

REV: 3

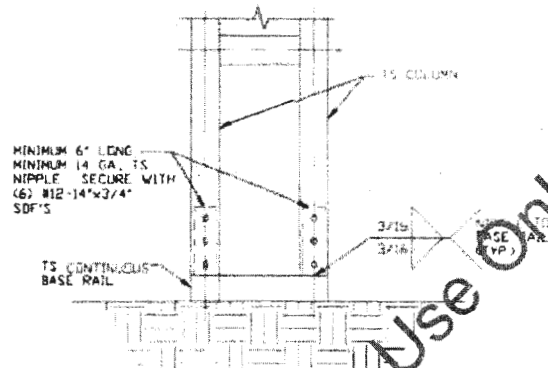
THIS DOCUMENT IS THE PROPERTY OF MOORE AND ASSOCIATES ENGINEERING AND CONSULTING. THE UNAUTHORIZED REPRODUCTION, COPYING, OR OTHERWISE USE OF THIS DOCUMENT IS STRICTLY PROHIBITED AND ANY INFRINGEMENT THEREUPON MAY BE SUBJECT TO LEGAL ACTION.

**BOW AND BOX EAVE RAFTER WALL OPENING DETAILS**

16

**END COLUMN/BASE RAIL  
CONNECTION DETAIL**

SCALE: NTS



17

**POST/BASE RAIL CONNECTION DETAIL**

SCALE: NTS

**RECEIVED**

OCT 27 2020

LICENSES &amp; PERMITS

**MOORE AND ASSOCIATES  
ENGINEERING AND CONSULTING, INC.**

DRAWN BY: SLH

David Nutter  
13850 Triadelphia Mill Rd  
Dayton MD 21036

DIVISION

CHECKED BY: PMH

PROJECT MGR: VSM

DATE: 4-18-19

SCALE: NTS

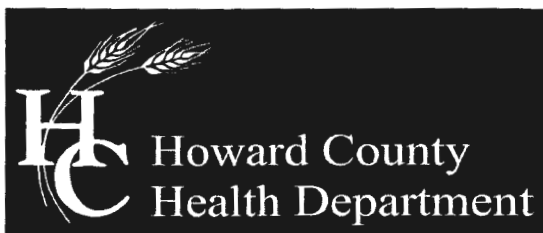
JOB NO: 17260S/  
17292S/18234S/19039SCLIENT: CARPORT  
CENTRAL

SHT. 13

DWG. NO: SK-3

REV. 3

THIS DOCUMENT IS THE PROPERTY OF MOORE AND ASSOCIATES ENGINEERING AND CONSULTING. THE UNAUTHORIZED REPRODUCTION, COPYING, OR OTHERWISE USE OF THIS DOCUMENT IS STRICTLY PROHIBITED AND ANY INFRINGEMENT THEREUPON MAY BE SUBJECT TO LEGAL ACTION.



## Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

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

[www.hchealth.org](http://www.hchealth.org)

Facebook: [www.facebook.com/hocohealth](https://www.facebook.com/hocohealth)

Twitter: HowardCoHealthDep

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

---

December 11, 2020

David S. Nutter  
13850 Triadelphia Mill Road  
Dayton, MD 21036

**RE: Waiver Approval**  
13850 Triadelphia Mill Road  
Dayton, MD 21036

Mr. Nutter,

This letter is being issued in response to your waiver request received November 23, 2020. Your request for a waiver of the Howard County Code requirement for a percolation certification plan has been **approved**. The proposed twenty-two (22) by fifty (50) foot pole barn has little to no impact on the established sewage disposal area available for on-site sewage disposal system repairs. Be advised that the site plan does not indicate vehicle access to the pole barn on an unpaved or paved driveway. Access to the pole barn may not cross the sewage disposal area.

Any deviations from the proposed work illustrated on the site plan submitted with the waiver request will be subject to further review by this department.

Any questions regarding this decision may be directed to the Well and Septic Program of the Howard County Health Department.

Respectfully,

Michael J. Davis  
Assistant Director

Bureau of Environmental Health



Attn: Mike Davis - <sup>Deputy</sup> Director of Environmental Health

Dear Mr. Davis,

My name is David Nutter. I am urgently contacting you today regarding building application # B20003888. My family and I have maintained a residence in Howard County our whole lives, the last 22 years of which have been spent at our current residence of 13850 Triadelphia Mill Road in Dayton. A little over 10 years ago I started a small lawn mowing service which has now thankfully grown into a 22 person landscape design and hardscaping company. Several of my tools have already been stolen from my property over the years, so I have sought out bids and a building permit application to construct a simple 22' x 50' pole barn in the back yard where we can keep a few pieces of equipment with lock doors to prevent this from happening again.

The reason I'm contacting you is because I've been advised by Mr. Hank Oswald to request a waiver of the percolation certification plan for this structure, due to it just being more of a shed in nature. It will never have a bathroom and is never intended to be a dwelling, or anything other than just keeping a few tools. I would greatly appreciate your consideration in this matter as a local small business owner that is just trying to protect our tools. I've attached some plat markups that show the whole property as well as the existing septic field, which is marked up with the proposed structure and shows a proposed construction distance of at least 20 feet away from the current septic field limits, as well as to be at least 30 feet away from the BRL on the west side of the property.

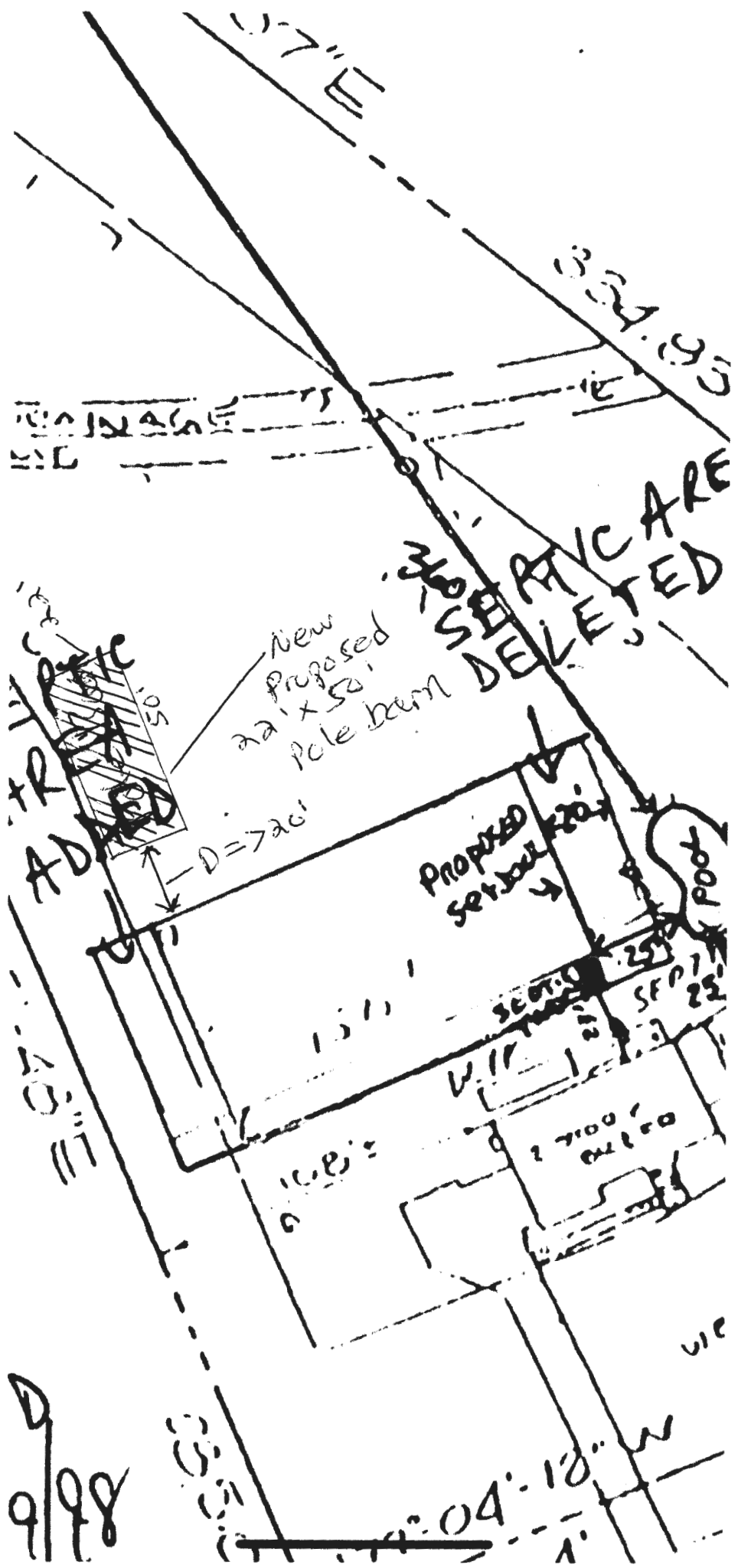
Please let me know if you need any information from me and I am glad to answer, as I am available 7 days a week 7am through 9pm.

Thank you again for your consideration and your help, as well as your service to our local government.

Sincerely,

David S Nutter  
(410) 599 - 6464  
President - Pro Lawn Care, LLC

A handwritten signature in cursive script that reads "David S. Nutter".



9/98



TION SURVEY  
 MADE BY MILL ROAD  
 TO  
 ENCE:  
 DIVISION OF LOT  
 NO. 3710  
 -9-10  
 E PROPERTY"  
 129

SEE  
 ATTACHED  
 MR 7/29/88

*Stevens*  
 POOL

Information on this plan shows  
 the improvements indicated  
 contained within the outlines  
 upon which they are erected  
 that is not to be construed as  
 statement of property lines.

I CERTIFY THAT WE HAVE  
 LOCATION SURVEY OF THE  
 LOTS, AND THAT THEY ARE  
 IN THE LOTS AS SHOWN HEREON.

MD 131 DATE 2/0/88

A-1-1-0-0-0-0

MILL ROAD

NFIP DATA

Community No: 2100XK1  
 Panel No: 0021 B  
 Zone: C

|                                                                                                                 |              |
|-----------------------------------------------------------------------------------------------------------------|--------------|
| Scale: 1" = 100'                                                                                                | Date: FEB 19 |
| J. Finley Flansone & Associate<br>Registered Land Surveyors<br>P.O. Box 10160<br>Towson, Maryland<br>21285-0160 |              |