



Building Permit Application

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

Date Received: 2/8/13

Permit No.: B13000441

CB130243

Building Address: 3415 Jennings Chapel Rd.
City: Woodbine State: MD Zip Code: 21797
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD
Proposed Use: SFD w/ addition
Estimated Construction Cost: \$ 30,000 - Thirty Thousand
Description of Work: 2 story addition attached 15'x29' + Remodel approx 500 sq. ft., kitchen + bath existing

Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: John Bosley
Address: 3415 Jennings Chapel Rd.
City: Woodbine State: MD Zip Code: 21797
Phone: 301-801-9124 Fax: _____
Email: hibba36@verizon.net

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: Owner
Contact Person: John Bosley
Address: _____
City: _____ State: _____ Zip Code: _____
License No.: _____
Phone: _____ Fax: _____
Email: _____

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height: _____	<input checked="" type="checkbox"/> SF Dwelling	<input type="checkbox"/> SF Townhouse
No. of stories: _____	Depth: <u>22</u>	Width: <u>40</u>
Gross area, sq. ft./floor: _____	1st Floor: <u>19</u>	40
Area of construction (sq. ft.): <u>435</u>	Basement: _____	
Use group: _____	<input type="checkbox"/> Finished Basement	
Construction type:	<input type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Crawlspace	
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Masonry	No. of Bedrooms: _____	
<input type="checkbox"/> Wood Frame	Multi-Family Dwelling	
<input type="checkbox"/> State Certified Modular	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	Footings: _____	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof: _____	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

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

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: [Signature]
Email Address: hibba36@verizon.net
Title/Company: _____

Print Name: John Bosley
Date: 2/8/13

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		<u>[Signature]</u>

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

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

Filing Fee	\$ <u>25</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$ <u>100</u>
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

White: Building Officials

Green: PSZA, Zoning

Yellow: PSZA, Engineering

Pink: Health

money order Gold: SHA

George M. looked @ plan

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

Date: 2/19/13
To: Dan Swinder
(Person's Name and Division)
From: John Bosley (301) 801-9124
(Your Name, Company Name and Telephone Number)
Subject: Project name _____
Project site address 3415 Jennings Chapel Rd. Woodbine
Permit Number B13000441 SDP # _____
Other information pertinent to this project _____

RECEIVED
FEB 20 2013
PLAN REVIEW DIVISION

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

____ Letter of response to Howard County plan review code letter

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

____ Structural steel certification

____ Energy conservation calculations

____ Certification for _____ (be specific).

3 Copies of PLOT PLAN (be specific).

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

____ Other _____

Is there anyone else that should be contacted regarding this project if there are questions?

If so, please list that person's name and telephone number below:

____ (Person's name) _____ (Telephone number)

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

Received by AKH

cc: P + Z
Healy

white: Plan Review Division
yellow: Applicant
pink: Permit Division

DB

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

Date: 3/26/13 Revision # 2
 To: Dan Swinder
 (Person's Name and Division)
 From: John Bosley (301) 801-9124
 (Your Name, Company Name and Telephone Number)
 Subject: Project name Bosley Addition
 Project site address 3415 Jennings Chapel Rd. Woodbine, 21797
 Permit Number B13000441 SDP # _____
 Other information pertinent to this project _____

- Please check the attachments below that you are submitting with this transmittal:
- Letter of response to Howard County plan review code letter
 - Revised plans and/or revised details: When submitting for a complete re-review, **duplicate sets shall be submitted.**
 - Structural steel certification
 - Energy conservation calculations
 - Certification for _____ (be specific).
 - 5 Copies of Plat Plan (be specific).
 - Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____
 - Other _____

RECEIVED
 MAR 26 2013
 LICENSES & PERMITS
 DIVISION

Is there anyone else that should be contacted regarding this project if there are questions?

If so, please list that person's name and telephone number below:

(Signature) _____ (_____) _____
 (Person's name) (Telephone number)

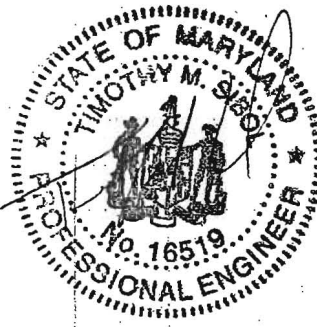
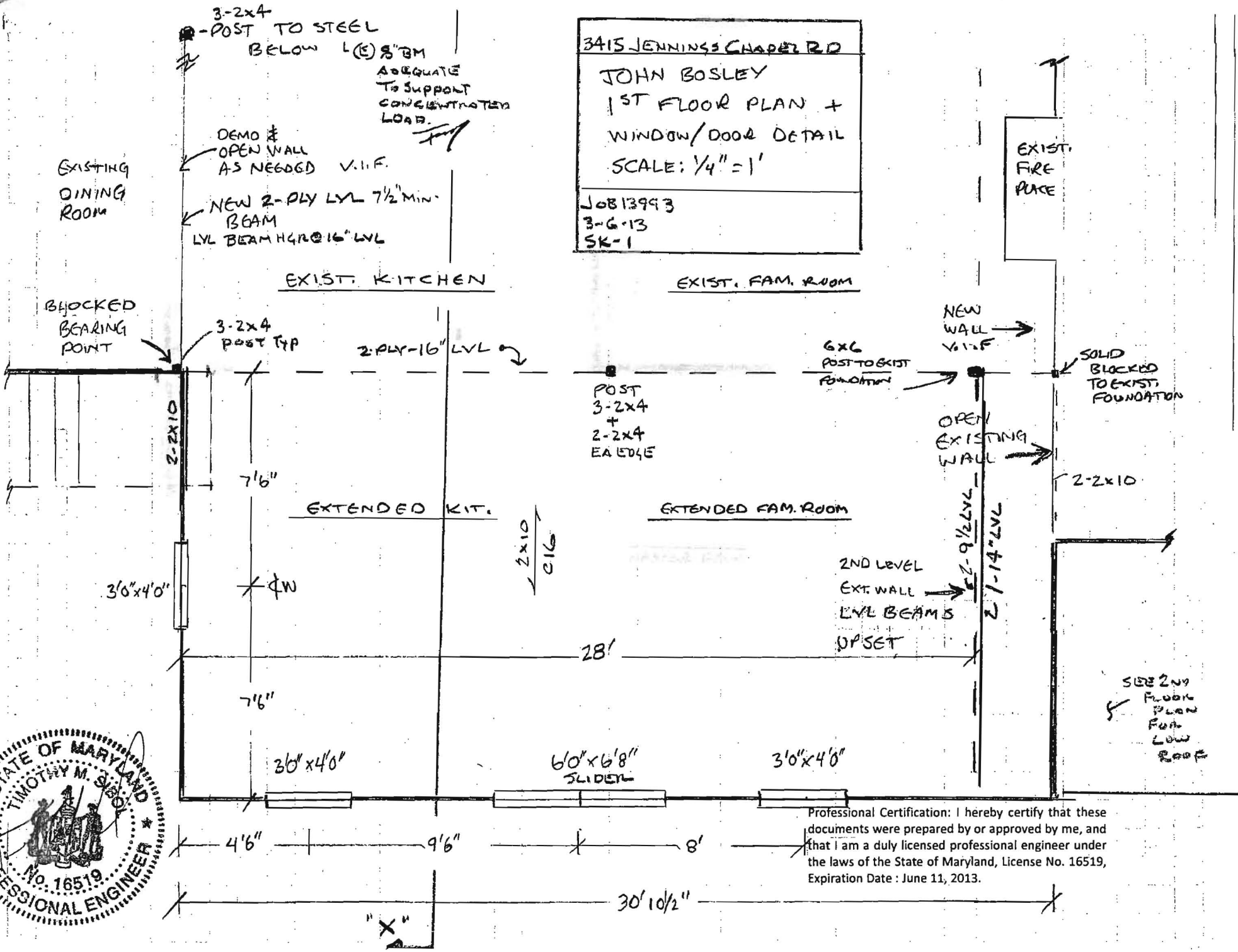
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Received by AKH

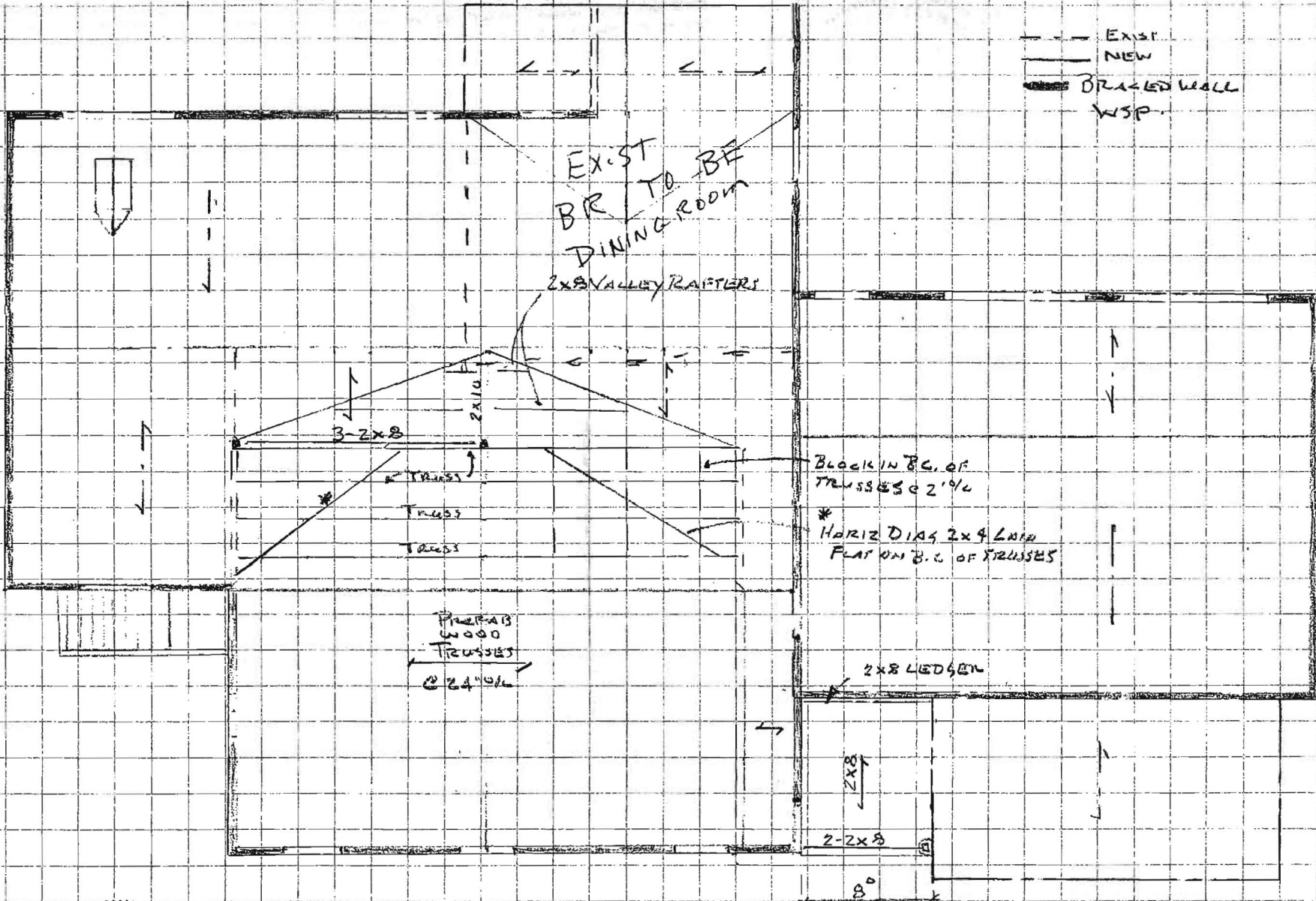
cc: DPZ
DED
Heath

white: Plan Review Division
 yellow: Applicant
 pink: Permit Division

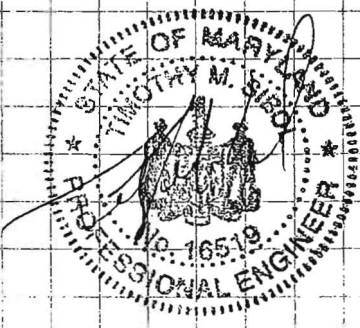
3415 JENNINGS CHAPEL RD
 JOHN BOSLEY
 1ST FLOOR PLAN +
 WINDOW/DOOR DETAIL
 SCALE: 1/4" = 1'
 JOB 13993
 3-6-13
 SK-1



Professional Certification: I hereby certify that these documents were prepared by or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland, License No. 16519, Expiration Date: June 11, 2013.

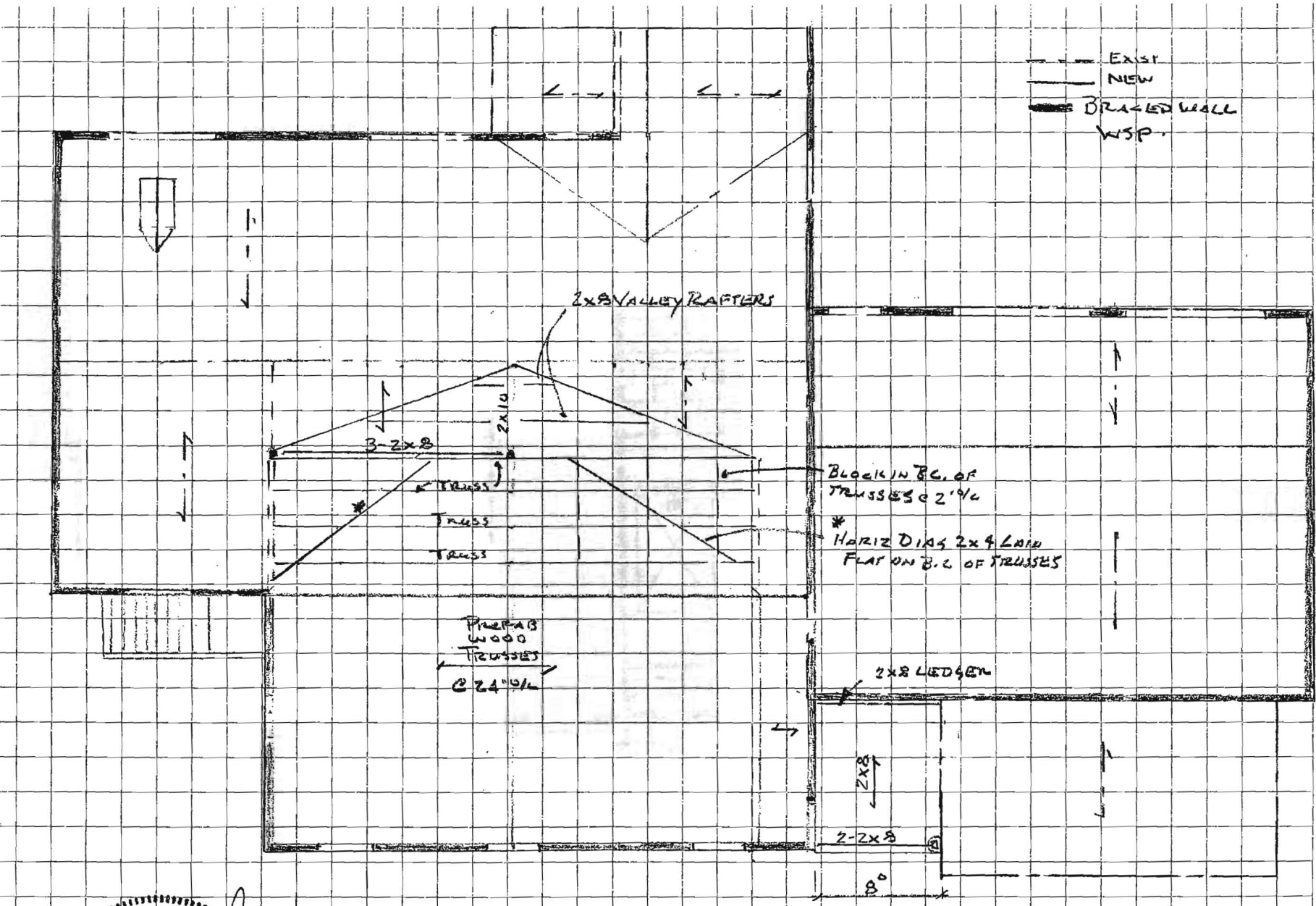


ROOF PLAN - 1/8" = 1'-0"



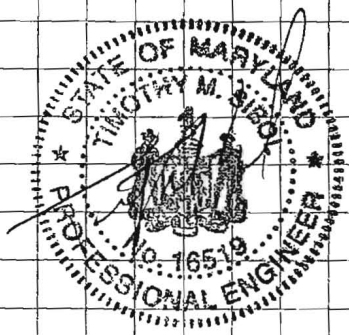
Professional Certification: I hereby certify that these documents were prepared by or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland, license No. 16519, Expiration Date: June 11, 2013.

JOHN BOSLEY
 ROOF
 3A15 JENNINGS
 CHARLES RD
 JOB 13993
 3-6-13 SK-3



--- EXIST
 ——— NEW
 ■ BRACKET WALL
 WSP

ROOF PLAN - 1/2" = 1'-0"

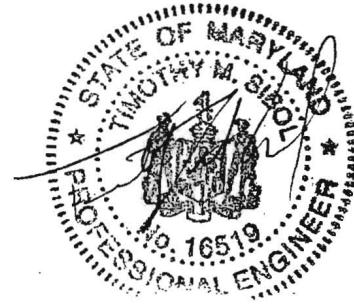


Professional Certification: I hereby certify that these documents were prepared by or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland, license No. 16519, Expiration Date : June 11, 2013.

JOHN BOSLEY
 ROOF
 3415 JENNINGS
 CHARLES RD.
 #
 JOB 13993

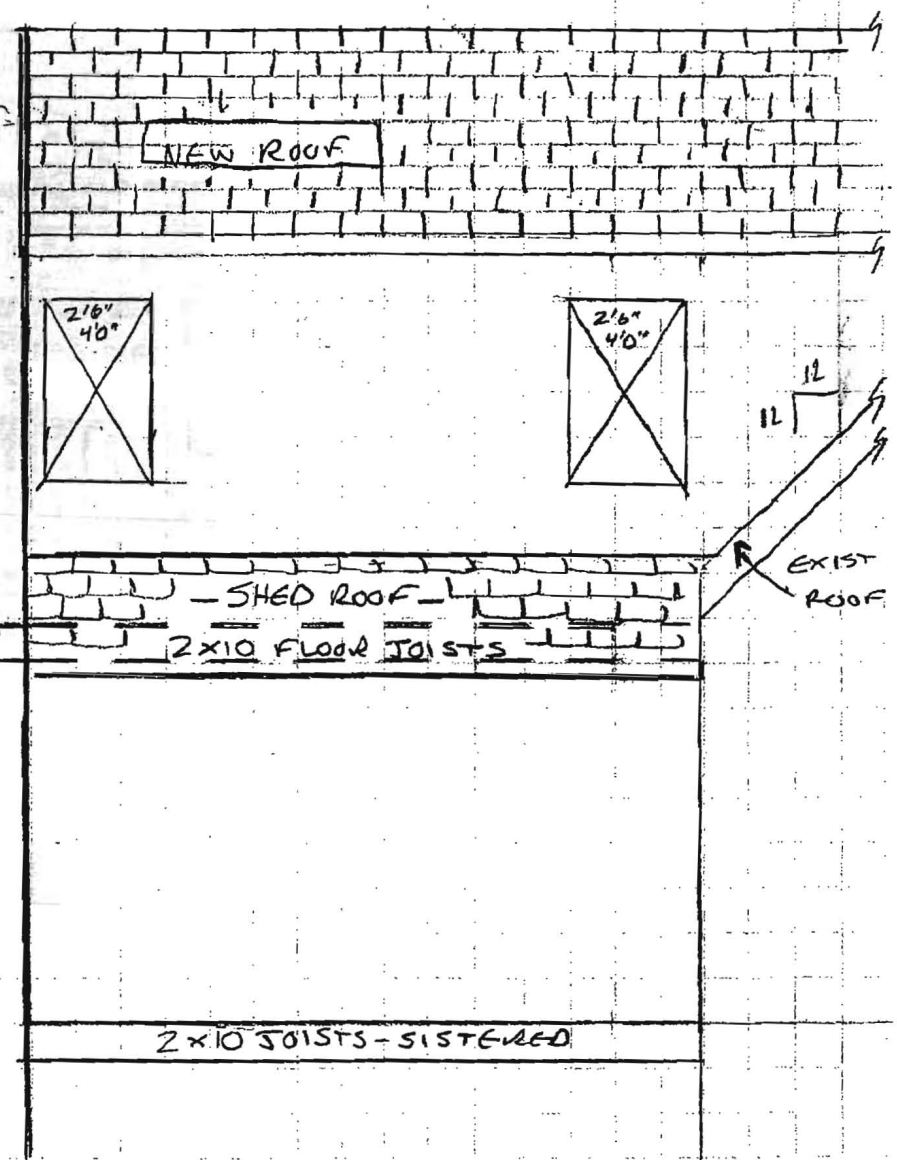
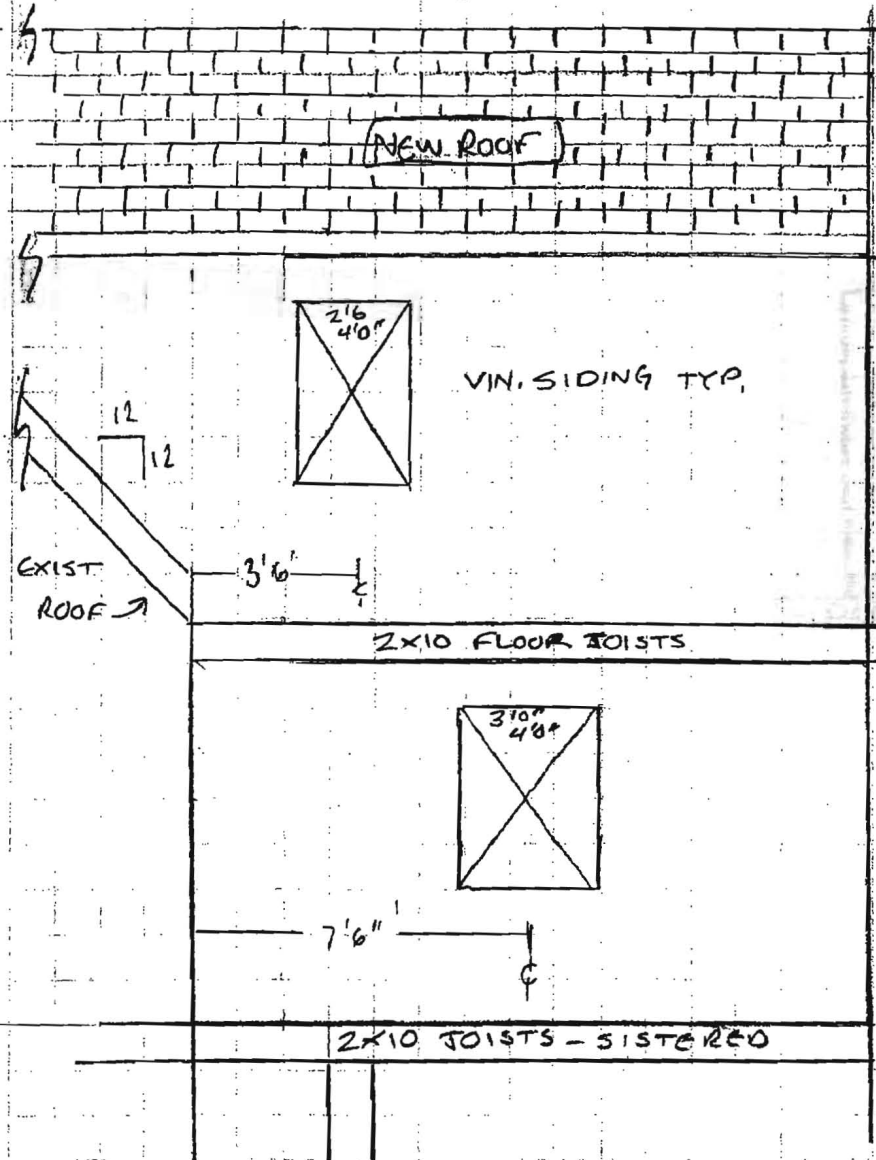
3415 JENNINGS CHAPEL RD
 BOSLEY ADDITION
 SCALE: 1/4" = 1'
 JOB 13993 3-6-13
 SK-4

Professional Certification: I hereby certify that these documents were prepared by or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland, License No. 16519, Expiration Date: June 11, 2013.

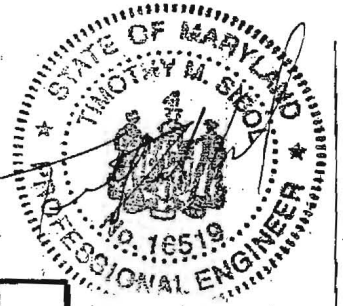


EAST ELEVATION/CROSS SECTION

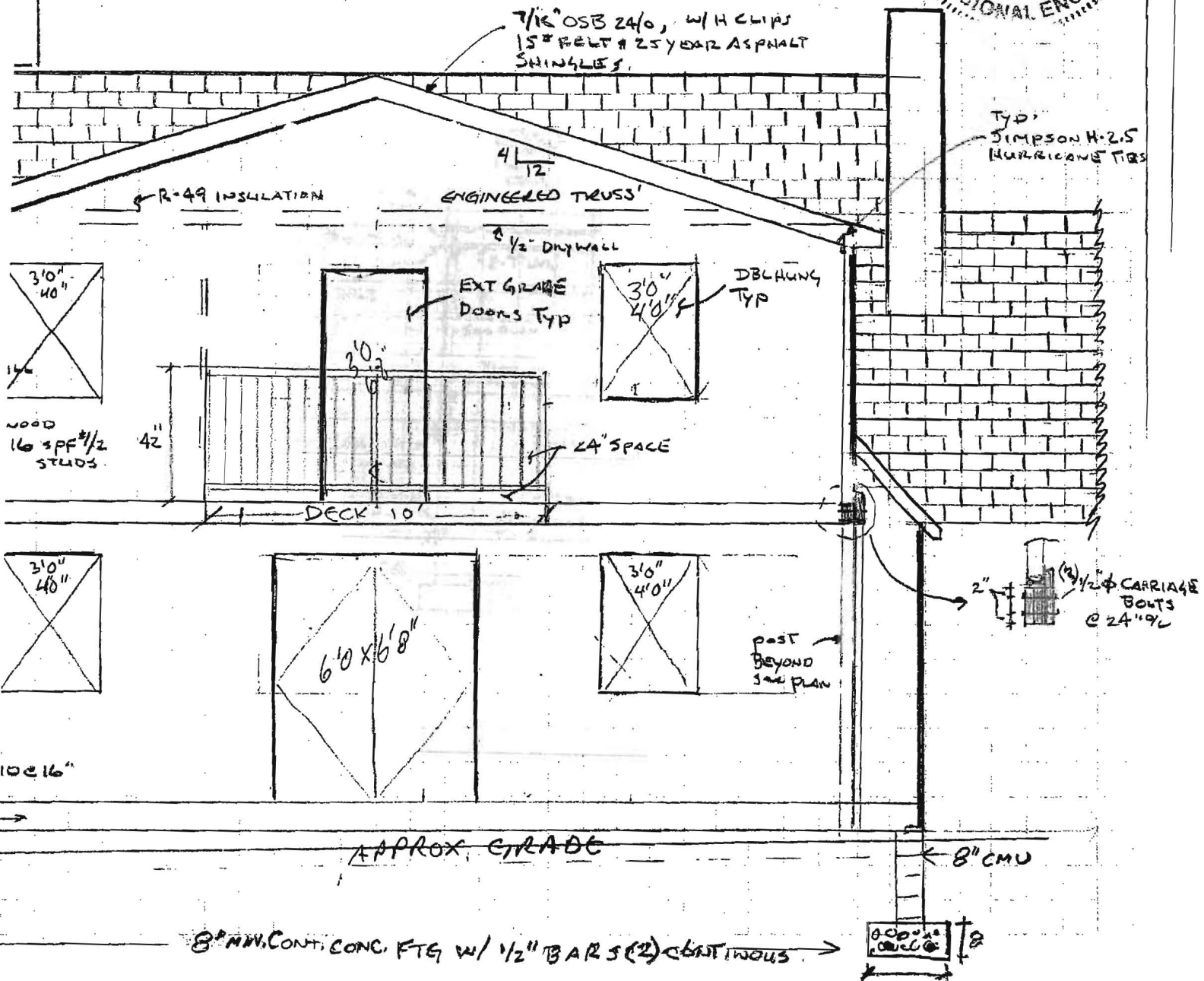
WEST ELEVATION/CROSS SECTION



Professional Certification: I hereby certify that these documents were prepared by or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland, License No. 16519, Expiration Date : June 11, 2013.

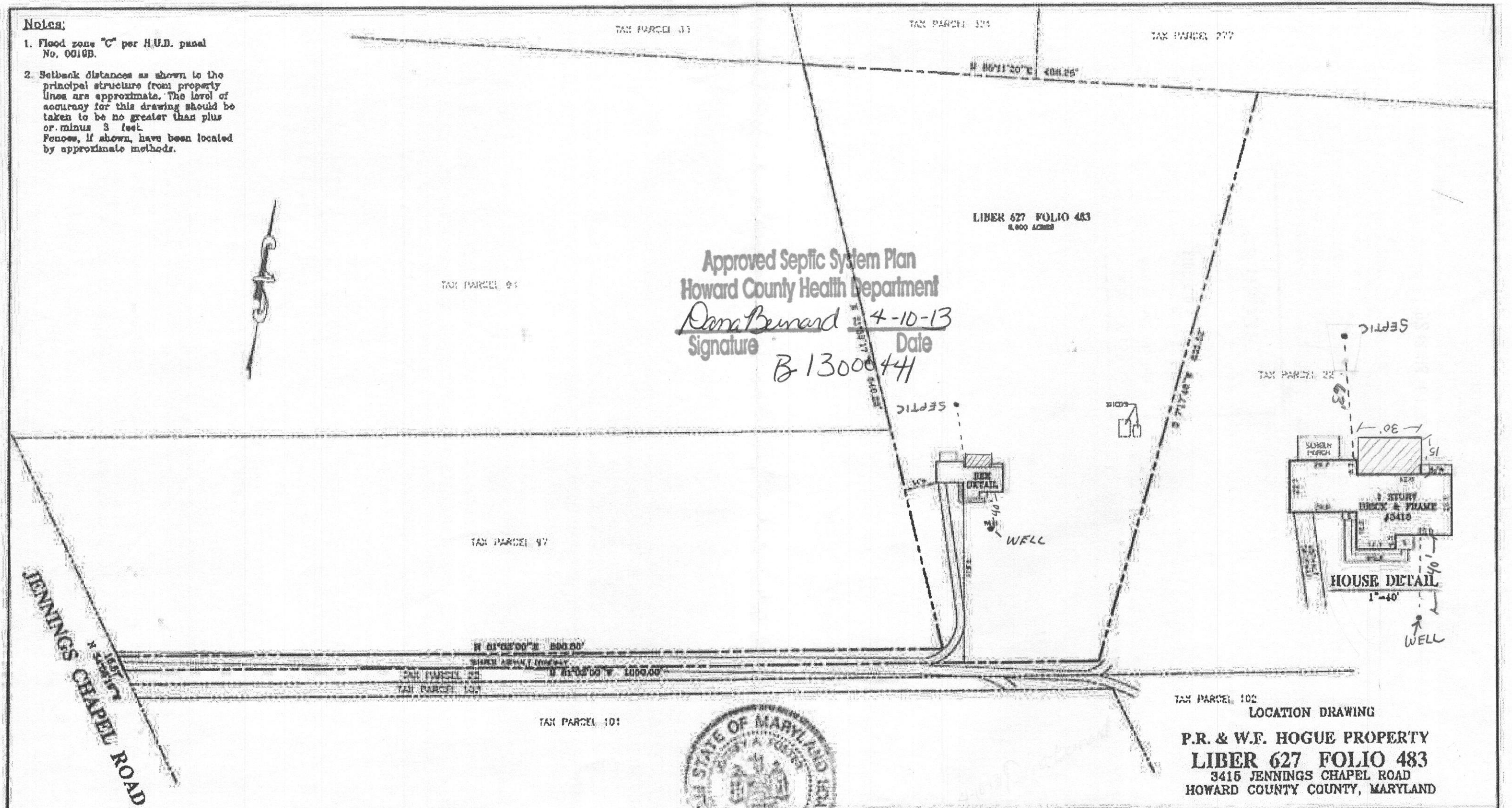


CHAPEL RD
- REAR ELEVATION/CROSS SECTION

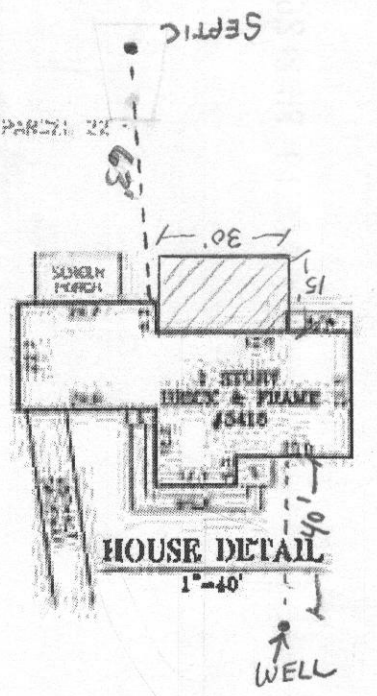


Notes:

1. Flood zone "C" per H.U.D. panel No. 0010B.
2. Setback distances as shown to the principal structure from property lines are approximate. The level of accuracy for this drawing should be taken to be no greater than plus or minus 3 feet. Fences, if shown, have been located by approximate methods.



Approved Septic System Plan
 Howard County Health Department
Rena Bernard 4-10-13
 Signature Date
 B 1300044



TAX PARCEL 102
LOCATION DRAWING
P.R. & W.F. HOGUE PROPERTY
LIBER 627 FOLIO 483
 3415 JENNINGS CHAPEL ROAD
 HOWARD COUNTY COUNTY, MARYLAND

CONSUMER INFORMATION NOTES:

1. This plan is a benefit to a consumer insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing.
2. This plan is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
3. This plan does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or re-financing.
4. Building line and/or Flood Zone information is taken from available sources and is subject to interpretation of originator.
5. No Title Report furnished.

SURVEYOR'S CERTIFICATE		REFERENCES		SNIDER & ASSOCIATES LAND SURVEYORS	
THE INFORMATION SHOWN HEREON HAS BEEN BASED UPON THE RESULTS OF A FIELD INSPECTION PURSUANT TO THE DEED OR PLAT OF RECORD. EXISTING STRUCTURES SHOWN HAVE BEEN FIELD LOCATED BASED UPON MEASUREMENTS FROM PROPERTY MARKERS FOUND OR FROM EVIDENCE OF LINES OF APPARENT OCCUPATION.		PLAT BK.		20270 Goldenrod Lane, Suite 110 Germantown, Maryland 20876 301/948-6100 Fax 301/948-1588	
<i>Jeffrey A. Foster</i> 97 MARYLAND PROPERTY LINE SURVEYOR REG. NO. 697		PLAT NO.			
LIBER	627	DATE OF LOCATION:	SCALE: 1" = 100'	WALL CORNER: DRAWN BY: J.T.H. HBR. LOC.: 6-28-11 JOB NO.: 11-01098	
FOLIO	483				