



Building Permit Application

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

Date Received: _____

Permit No.: B15000663

Building Address: 5004 Lindora Court
 City: Lithonia State: MD Zip Code: 31165
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Walnut Creek
 Section: _____ Area: _____ Lot: 63
 Tax Map: 28 Parcel: 49 Grid: 11
 Zoning: _____ Map Coordinates: _____ Lot Size: 40,280 SF
 Existing Use: Vacant lot
 Proposed Use: SFD
 Estimated Construction Cost: \$ 250,000
 Description of Work: Model on site - Remodel 1 1/2
Flor 6, 1/2 upper + lower level, 3 car side
level garage, side entrance, deck, stairs, etc.
 Occupant or Tenant: owner
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: BV Business Trust
 Address: PO Box 487
 City: Lithonia State: MD Zip Code: 31165
 Phone: 770-598-6577 Fax: _____
 Email: _____
 Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Richard L. ...
 Address: 6557 ...
 City: Lithonia State: MD Zip Code: 31165
 Phone: 770-598-7209 Fax: _____
 Email: ...
 Contractor Company: ...
 Contact Person: ...
 Address: 1255 ...
 City: Milford State: VA Zip Code: 22601
 License No.: 441-1136
 Phone: 703-598-0377 Fax: _____
 Email: _____
 Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics
Height: _____	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: _____	Depth Width
Gross area, sq. ft./floor: _____	1 st floor: _____
Area of construction (sq. ft.): _____	2 nd floor: _____
Use group: _____	Basement: _____
Construction type:	<input checked="" type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Wood Frame	No. of Bedrooms: <u>2</u>
<input type="checkbox"/> State Certified Modular	Multi-family Dwelling
<input type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units: _____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units: _____
Roadside Tree Project Permit # _____	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
	Footings: _____
	Roof: _____
	<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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" 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:	<u>615000663</u>
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 HIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: _____ Print Name: _____
 Email Address: _____ Date: 2/23/15
 Title/Company: _____

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY.

PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>3-11-15</u>	<u>Deborah</u>
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START		

DPZ SETBACK INFORMATION

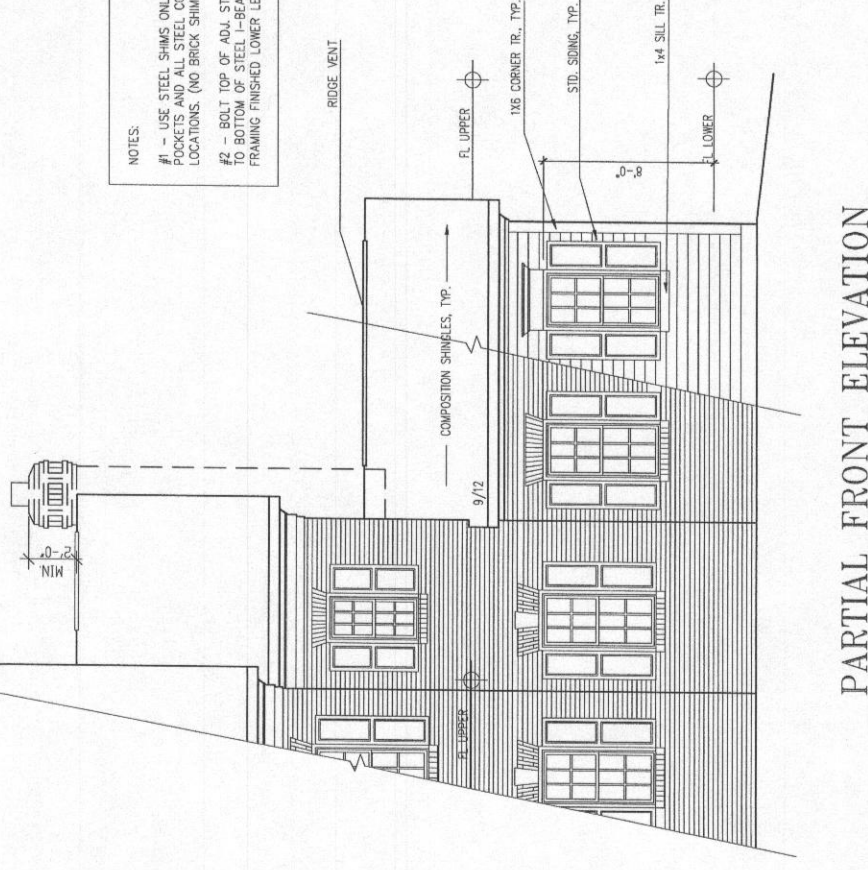
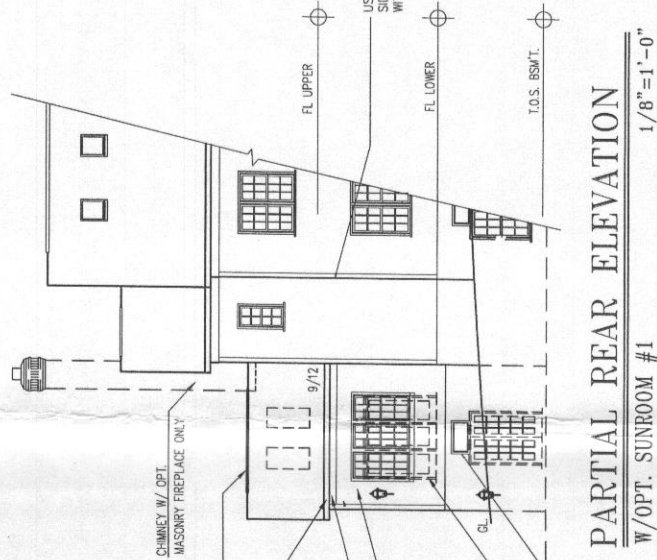
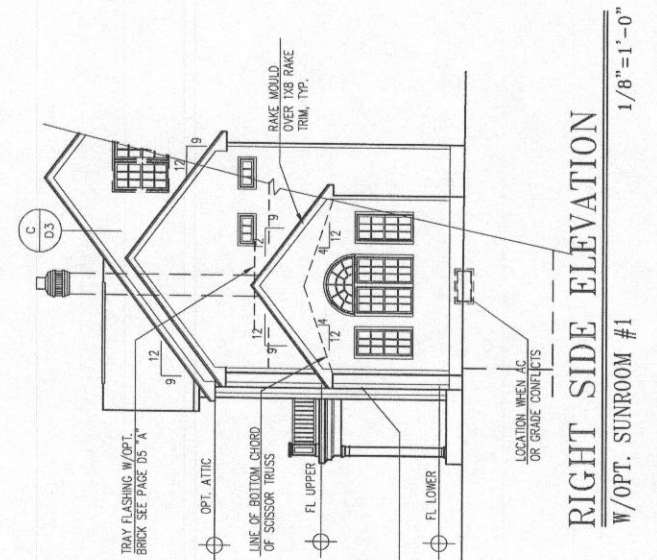
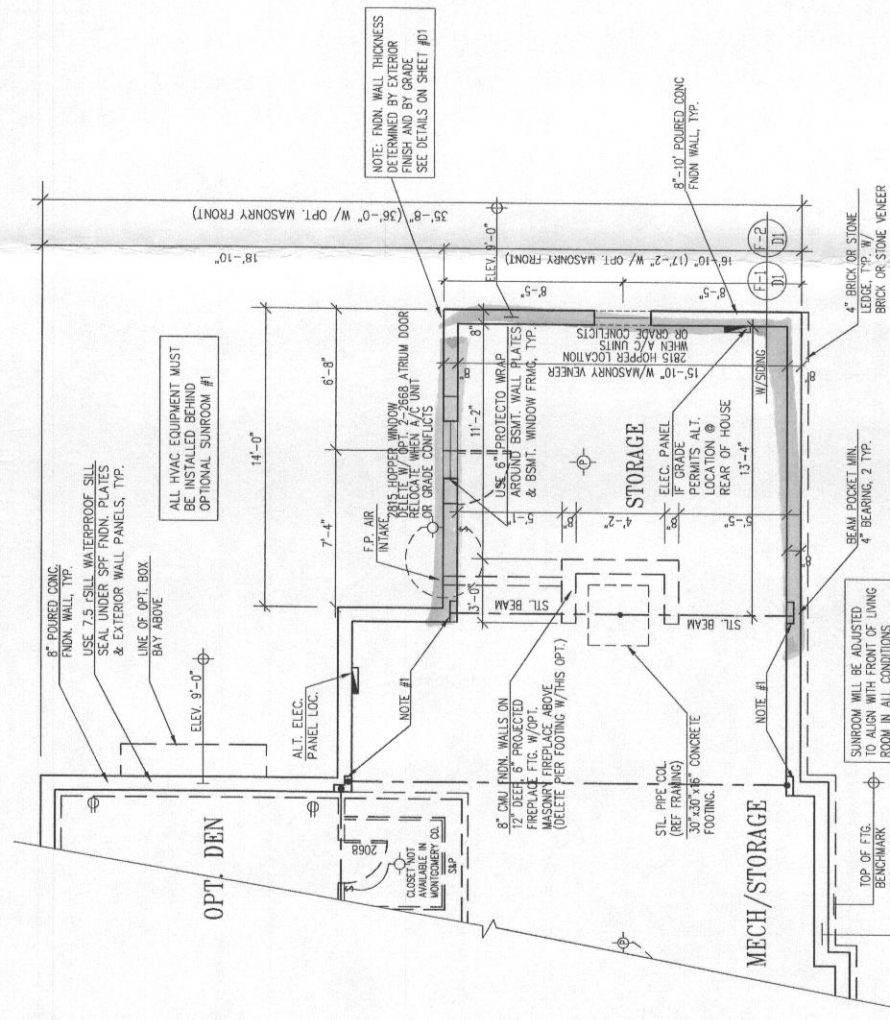
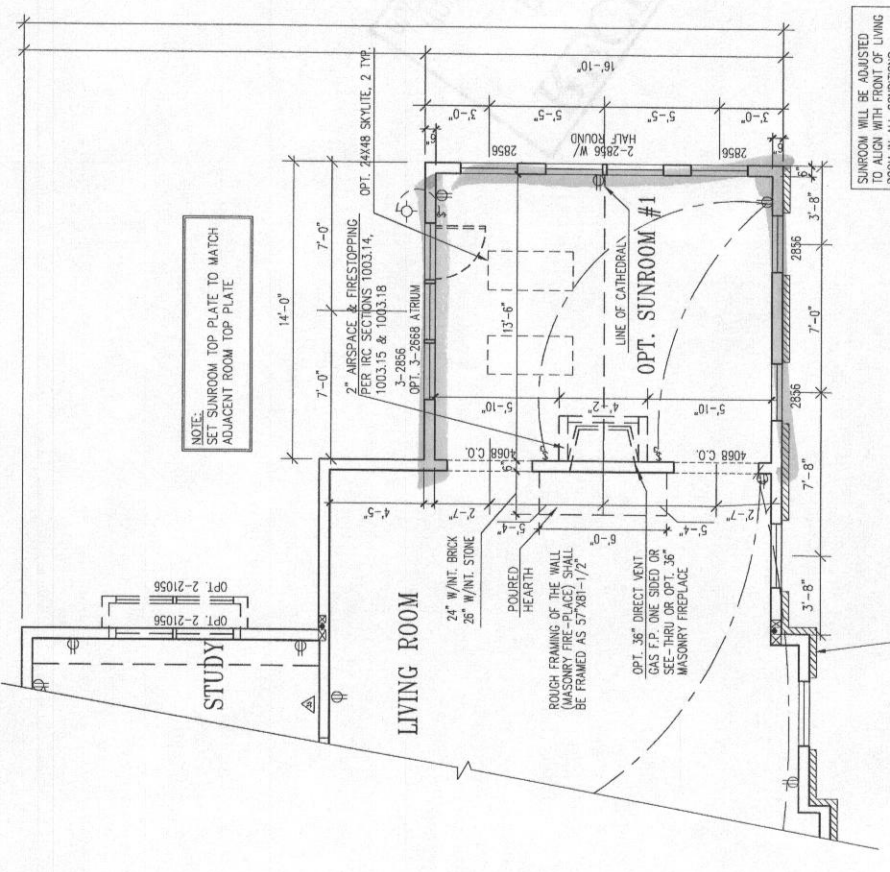
Front: _____
 Rear: _____
 Side: _____
 Side St.: _____
 All minimum setbacks met? Yes No
 Is Entrance Permit Required? Yes No
 Historic District? Yes No
 Lot Coverage for New Town Zone: _____
 SDP/Red-line approval date: _____

Filing Fee	\$ <u>100</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check #	<u>6074656</u>

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

DATE	BY	CHKD BY	DESCRIPTION
14/02/01	RTS		
10/24/03	REV 04		
10/26/03	ACR #1028		
10/29/03	ACR #1023		
11/13/03	REV 07		
02/27/04	ACR #1035		
02/27/04	ACR #1038		
03/13/04	ACR #1038		
03/22/04	ACR #1040		
06/10/04	REV 08		
10/19/04	REV 09		
12/02/04	ACR #1051		

= finished Areas



lot 63

Health Dept.
5004 Undera Ct.

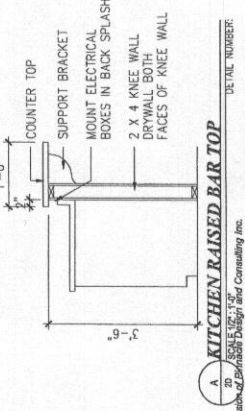
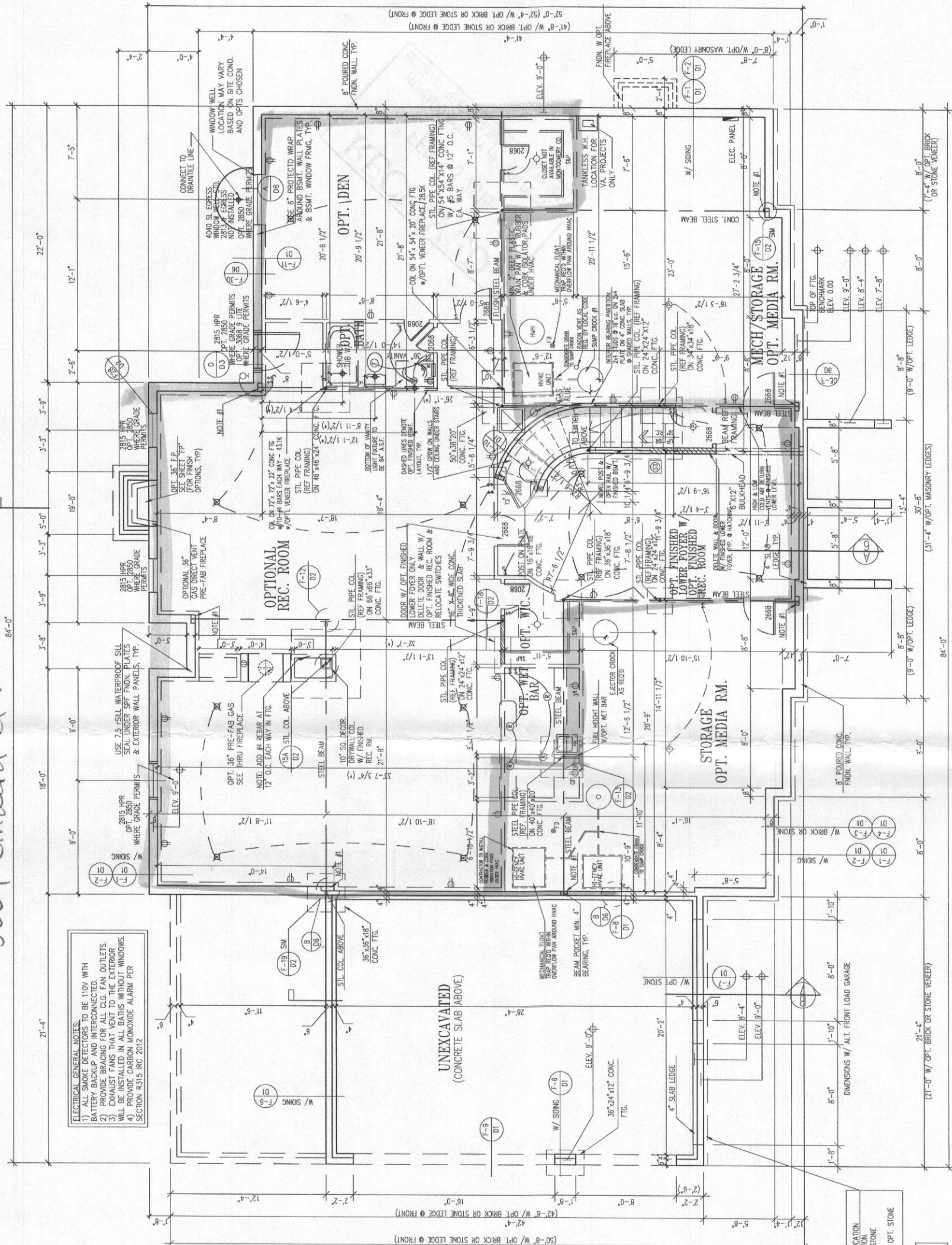
finished Areas

Pinnacle Design & Consulting Inc.
ARCHITECTURE • PLANNING • CONSULTING • MARKET ANALYSIS • BENCHMARKING
703.218.3400 • Fax 703.218.3407 • Web Site www.pdc-bcm.com
1150 Park Blvd., Suite 402 • Palm Beach Gardens, FL 33418

FNDN / BSMT PLAN w/ ALT. EXT. STUDY
CLIENT INFORMATION
CRAFTMARK HOMES / KENWOOD II

DATE	1/4/2011
REV#	00
REV#	01
REV#	02
REV#	03
REV#	04
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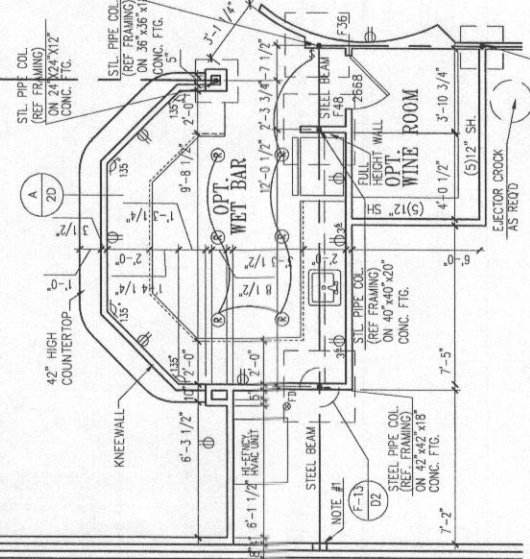
2D
SHEET TITLE
FRAME NO.



FOUNDATION/BASEMENT FLOOR PLAN
 W/ OPT. EXTENDED STUDY @ FIRST FLOOR OR ALTERNATE FIRST FLOOR
 SHOWN W/ ELEVATION #6
 UNLESS OTHERWISE NOTED SET WINDOW HEAD HEIGHT @ 5'-6" ABOVE TOP OF SLAB
 1/4" = 1'-0"

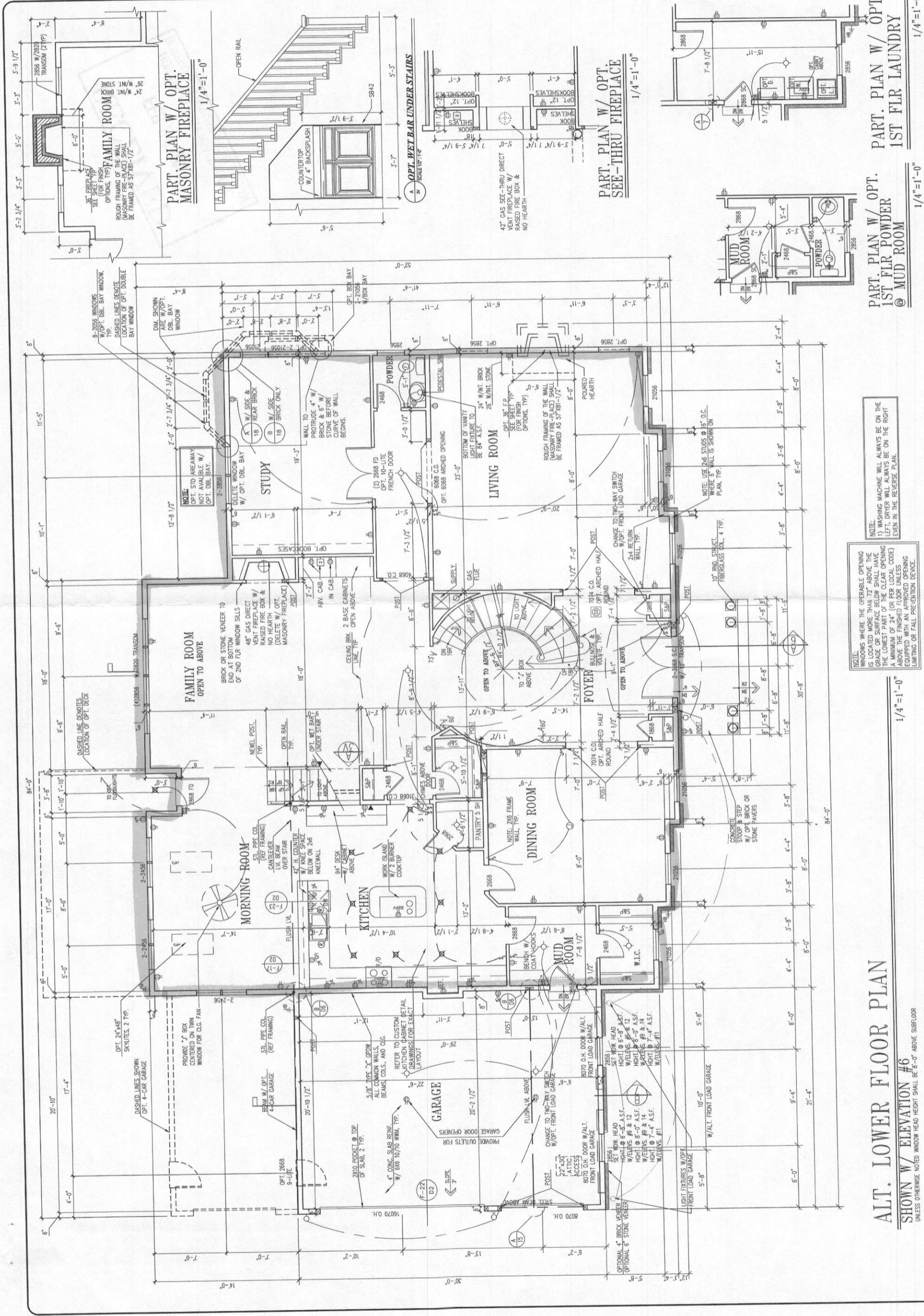
FOOTING SCHEDULE

2000 PSF	14" X 28"
2500 PSF	10" X 22"
3000 PSF	10" X 20"



= finished Areas

NO.	DATE	BY	CHKD.
RTS	14/2/2011		
REV #1	10/24/2013		
ACH #102	10/25/2013		
ACH #103	10/25/2013		
ACH #104	11/15/2013		
ACH #105	02/27/2014		
ACH #106	02/27/2014		
ACH #108	03/13/2014		
ACH #109	07/25/2014		
REV #2	10/16/2014		
ACH #101	12/22/2014		



PART. PLAN W/ OPT. MASONRY FIREPLACE
 1/4" = 1'-0"

PART. PLAN W/ OPT. SEE-THRU FIREPLACE
 1/4" = 1'-0"

PART. PLAN W/ OPT. 1ST FLR POWDER @ MUD ROOM
 1/4" = 1'-0"

PART. PLAN W/ OPT. 1ST FLR LAUNDRY
 1/4" = 1'-0"

NOTE: WINDOWS WHERE THE OPERABLE OPENING IS LOCATED MORE THAN 72" ABOVE THE GRADE OR SURFACE BELOW SHALL HAVE THE LOWEST PART OF THE CLEAR OPENING A MINIMUM OF 24" (OR PER LOCAL CODE) ABOVE THE FINISHED FLOOR UNLESS EQUIPPED WITH AN APPROVED OPENING LIMITING OR FALL PREVENTION DEVICE.

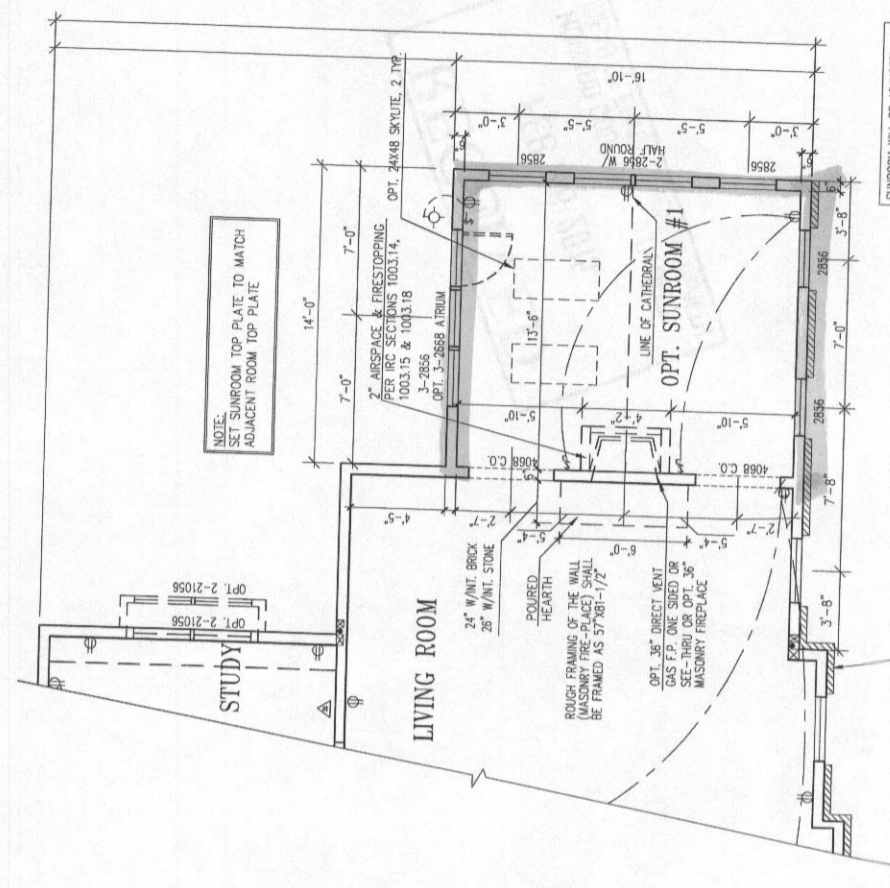
NOTE: WASHING MACHINE WILL ALWAYS BE ON THE LEFT, DRYER WILL ALWAYS BE ON THE RIGHT EVEN IN THE REVERSE PLAN.

ALT. LOWER FLOOR PLAN
 SHOWN W/ ELEVATION #6
 UNLESS OTHERWISE NOTED WINDOW HEAD HEIGHT SHALL BE 8'-0" ABOVE SUBFLOOR

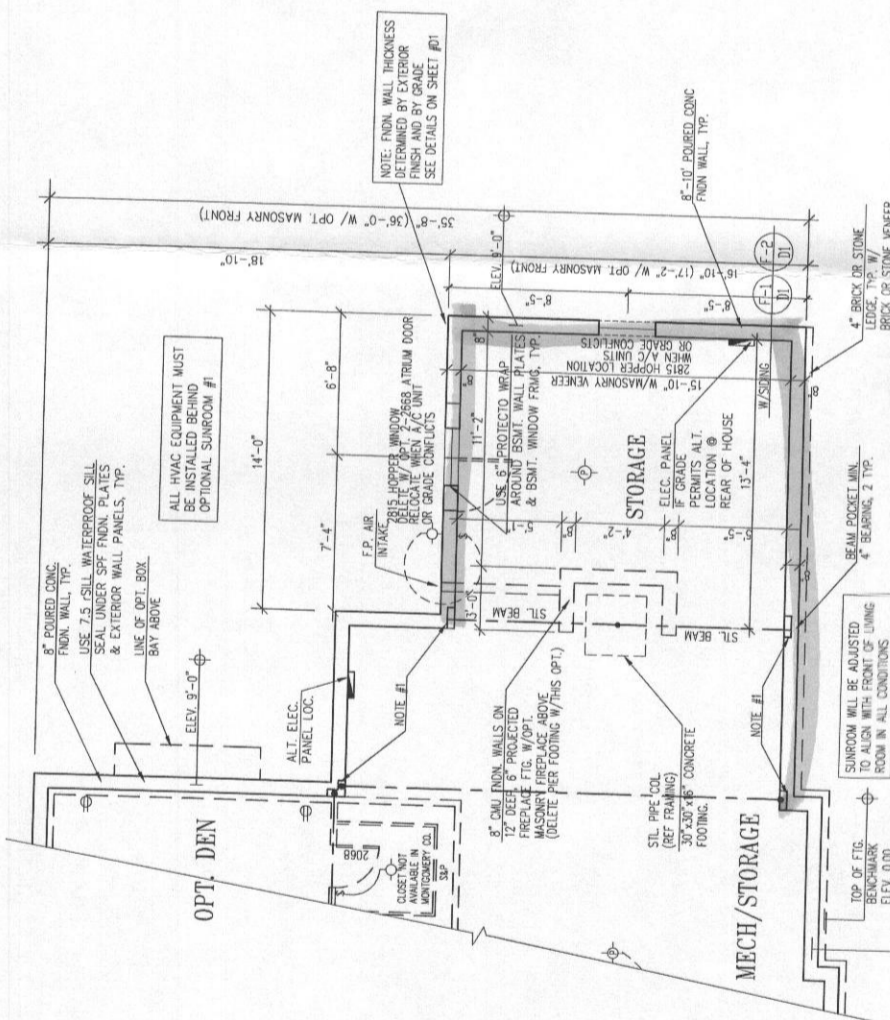
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■ = finished areas

REV. NO.	DATE	BY	CHKD.
14/2001			
REV. #1	10/24/2013		
ACR #102	02/28/2013		
ACR #103	10/20/2013		
REV. #7	11/13/2013		
ACR #105	02/27/2014		
ACR #108	02/27/2014		
ACR #103	07/03/2014		
REV. #8	09/10/2014		
REV. #9	09/10/2014		
ACR #101	02/26/2014		

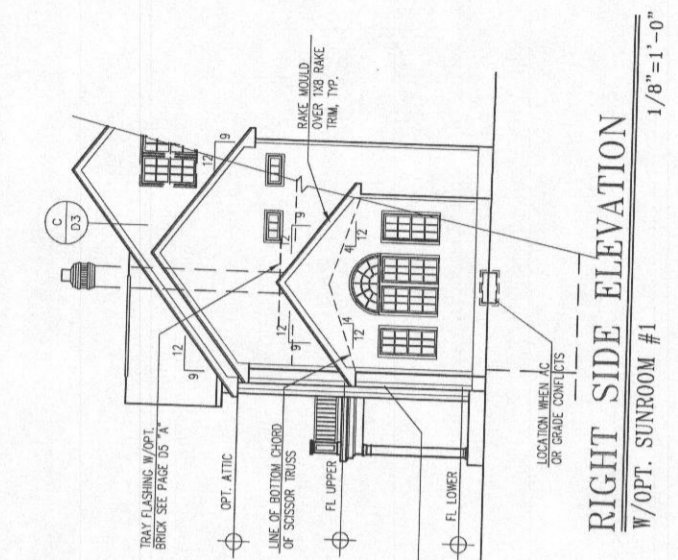


PARTIAL LOWER FLOOR PLAN
 SHOWN W/ OPTIONAL SUNROOM #1
 SHOWN W/ OPTIONAL BRICK @ FRONT, SIDE & REAR
 UNLESS OTHERWISE NOTED WINDOW HEAD HEIGHT SHALL BE 8'-0" ABOVE SUBFLOOR
 1/4" = 1'-0"

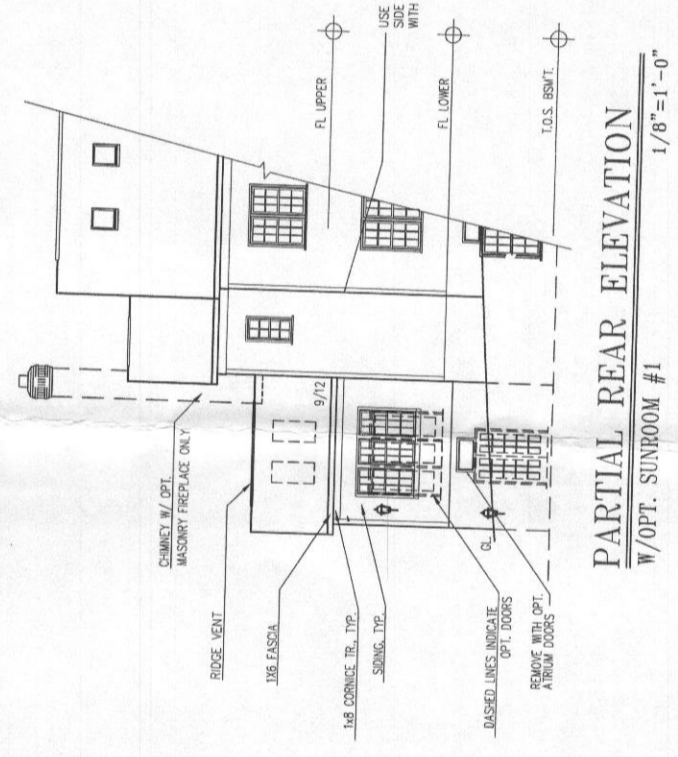


PARTIAL FOUNDATION PLAN
 SHOWN W/ OPTIONAL SUNROOM #1 ABOVE
 SHOWN W/ OPTIONAL BRICK @ FRONT, SIDE & REAR
 1/4" = 1'-0"

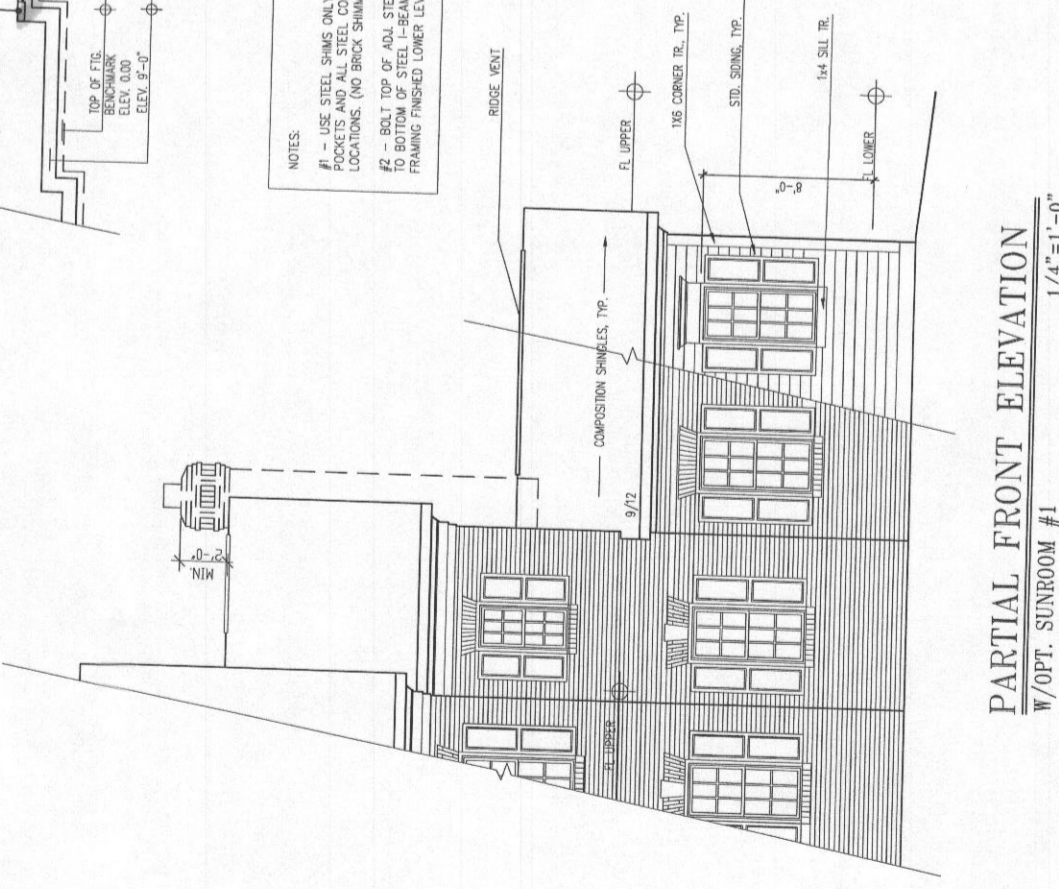
NOTES:
 #1 - USE STEEL SHIMS ONLY AT BEAM POCKETS AND ALL STEEL COLUMN LOCATIONS. (NO BRICK SHIMMING)
 #2 - BOLT TOP OF ADJ. STEEL COLUMN TO BOTTOM OF STEEL I-BEAM BEFORE FRAMING FINISHED LOWER LEVELS.



RIGHT SIDE ELEVATION
 W/OPT. SUNROOM #1
 1/8" = 1'-0"



PARTIAL REAR ELEVATION
 W/OPT. SUNROOM #1
 1/8" = 1'-0"



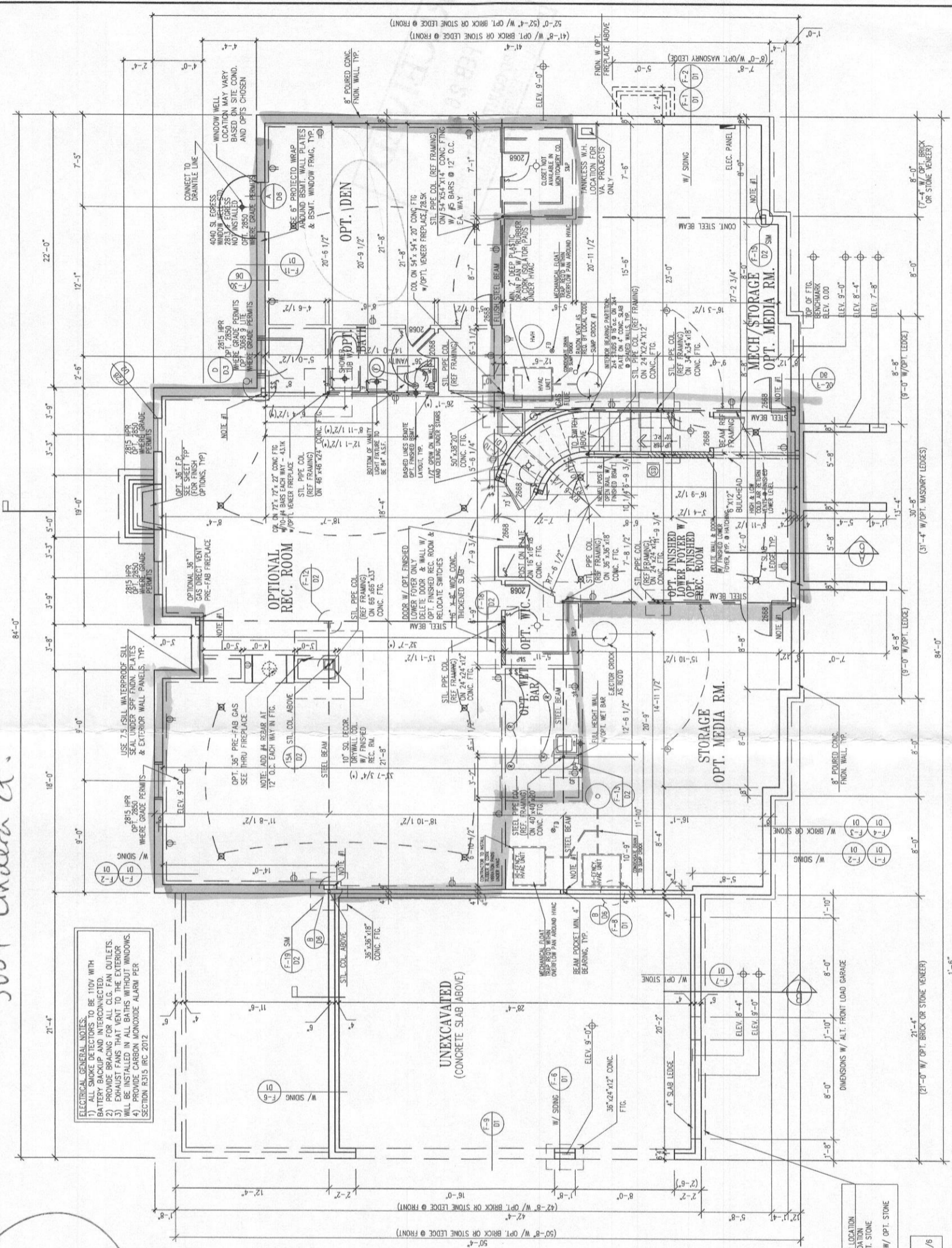
PARTIAL FRONT ELEVATION
 W/OPT. SUNROOM #1
 1/4" = 1'-0"

Permit # B152000663 of 63

Health Dept.
5004 Linden Ct.

5 h beams
5 h beams

DATE	14/02/01
REV#	00
REV#	01
REV#	02
REV#	03
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REV#	100

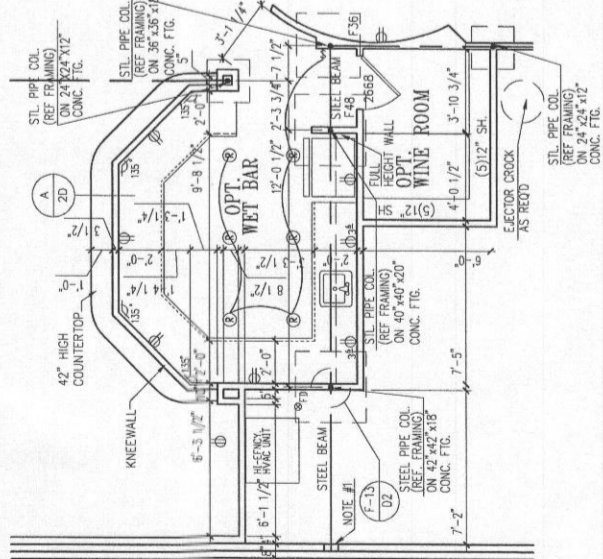


ELECTRICAL GENERAL NOTES:
1) ALL SMOKE DETECTORS TO BE 110V WITH BATTERY BACKUP AND INTERCONNECTED.
2) PROVIDE BRACING FOR ALL CIG. FAN OUTLETS.
3) PROVIDE SMOKE DETECTORS IN ALL BATHS WITHOUT WINDOWS.
4) PROVIDE CARBON MONOXIDE ALARM PER SECTION R315 IRC 2012

NOTES:

#1	USE STEEL SHIMS ONLY AT BEAM POCKETS AND ALL STEEL COLUMN LOCATIONS. (NO BRICK SHIMMING)
#2	BOLT TOP OF ADJ. STEEL COLUMN TO BOTTOM OF STEEL-BEAM BEFORE FRAMING FINISHED LOWER LEVELS.

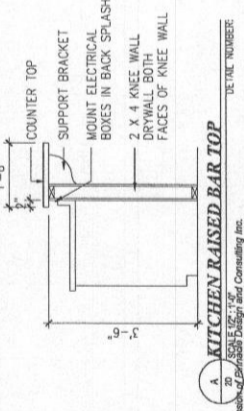
FOOTING SCHEDULE	14"X28"	10"X22"	10"X20"
2000 PSF			
2500 PSF			
3000 PSF			



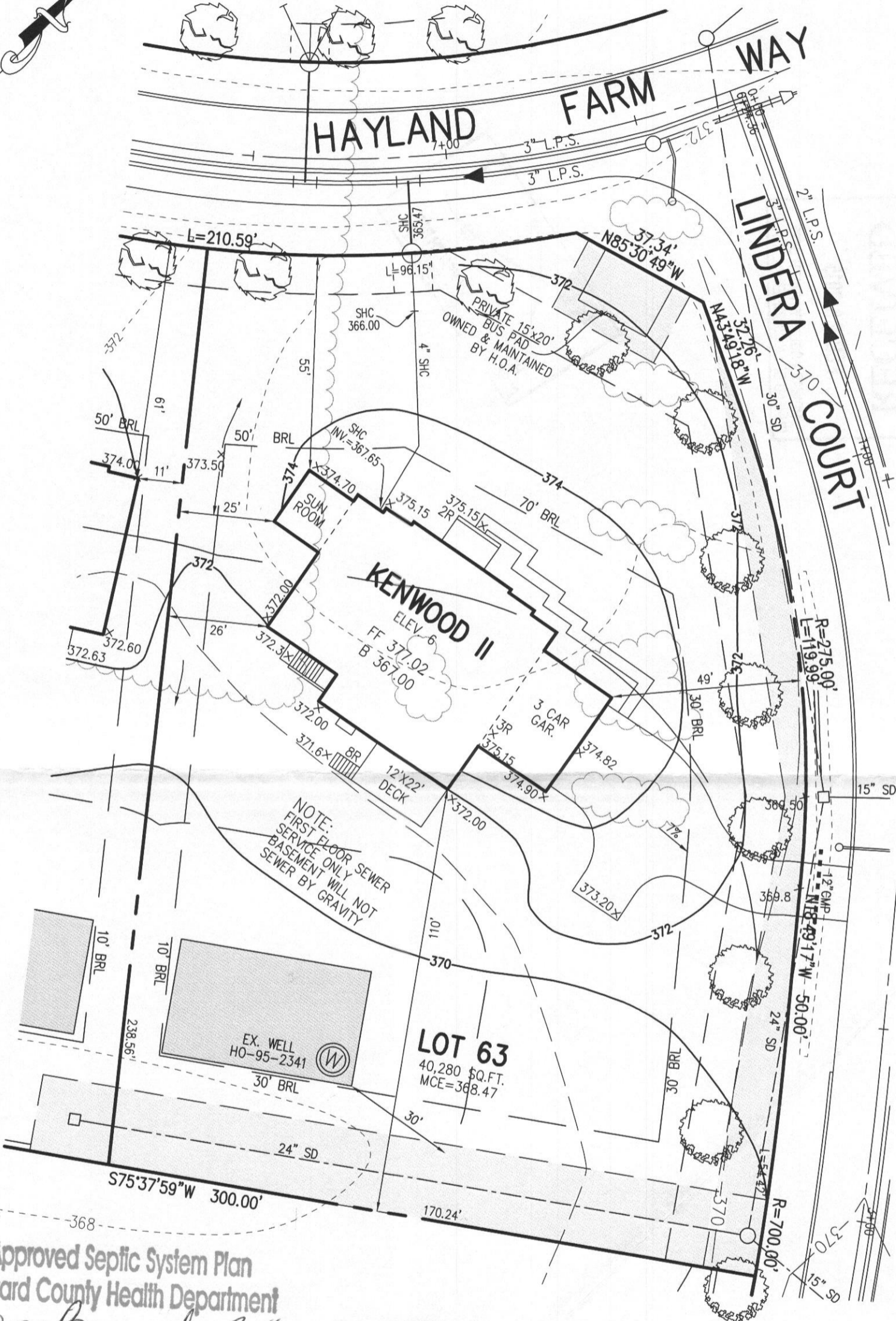
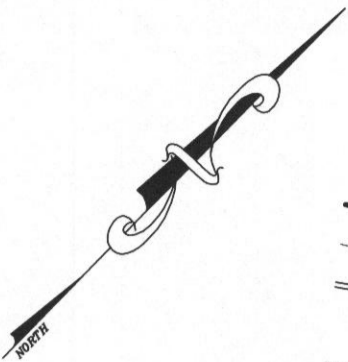
OPT. WET BAR W/ ALTERNATE FLOOR PLANS
AVAILABLE W/ ALT. FOUNDATION PLAN ONLY
1/4"=1'-0"

DASHED LINE DENOTES NEW LOCATION OF OUTSIDE FACE OF FOUNDATION WALL W/ OPT. BRICK & OPT. STONE VENEERS.
ADD 4" W/ OPT. BRICK OR W/ OPT. STONE

NOTE:
(*) - REFERENCE C/D/6



FOUNDATION/BASEMENT FLOOR PLAN
W/ OPT. EXTENDED STUDY @ FIRST FLOOR OR ALTERNATE FIRST FLOOR
SHOWN W/ ELEVATION #6
UNLESS OTHERWISE NOTED SET WINDOW HEAD HEIGHT @ 6'-5" ABOVE TOP OF SLAB
1/4"=1'-0"



NOTE:
FIRST FLOOR SEWER
SERVICE ONLY
BASEMENT WILL NOT
SEWER BY GRAVITY

Approved Septic System Plan
Howard County Health Department
Dana Bernard 3-11-15
Signature Date
B 15000663

PLAN
SCALE: 1"=30'

WELL CERTIFICATION:
THE EXISTING WELL, TAG NO. HO-95-2341, HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN.

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLCOTT CITY, MARYLAND 21042
(410) 461 - 2855

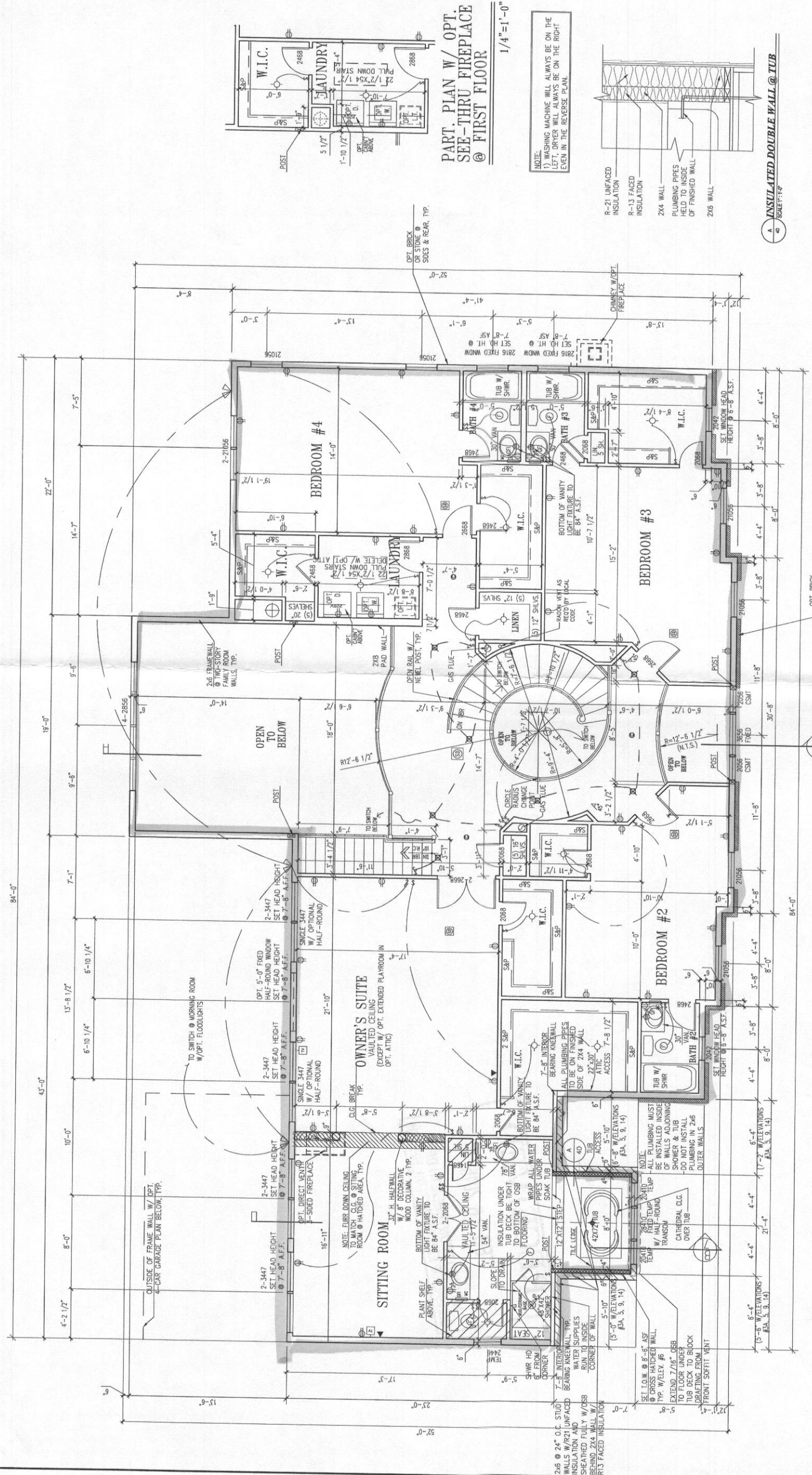
OWNER
BV BUSINESS TRUST
P.O. BOX 482
LISBON, MARYLAND 21765-0482

PERMIT SITE PLAN
LOT 63
5004 LINDERA COURT
WALNUT CREEK
ZONED: RC-DEO
TAX MAP NO.: 28 PARCEL NO. 49 GRID NO.: 17 & 18
SIXTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1" = 30' DATE: FEBRUARY 4, 2015

= finished Areas

REV. NO.	DATE	DESCRIPTION
1/4/2011		
REV. #1	10/24/2013	
REV. #2	10/28/2013	
REV. #3	10/28/2013	
REV. #4	11/13/2013	
REV. #5	02/27/2014	
REV. #6	02/27/2014	
REV. #7	03/12/2014	
REV. #8	07/02/2014	
REV. #9	08/12/2014	
REV. #10	10/10/2014	
REV. #11	10/22/2014	
REV. #12	10/22/2014	

PROJECT NO. 1022014
 SHEET NO. 40



NOTE:
 1) WASHING MACHINE SHALL ALWAYS BE ON THE LEFT DRYER SHALL ALWAYS BE ON THE RIGHT EVEN IN THE REVERSE PLAN.

NOTE:
 WINDOWS WHERE THE OPERABLE OPENING IS LOCATED MORE THAN 72" ABOVE THE GRADE OR SURFACE BELOW SHALL HAVE THE LOWEST PART OF THE CLEAR OPENING ABOVE THE GRADE OR SURFACE (OR PER LOCAL CODE) EQUIPPED WITH AN APPROVED OPENING LIMITING OR FALL PREVENTION DEVICE.

ELECTRICAL GENERAL NOTES:
 1) ALL SMOKE DETECTORS TO BE 110V WITH BATTERIES AND PERMANENTLY CONNECTED.
 2) PROVIDE BRACING FOR ALL OUTLETS.
 3) EXHAUST FANS THAT VENT TO THE EXTERIOR WILL BE INSTALLED IN ALL BATHS WITHOUT WINDOWS.
 4) PROVIDE CARBON MONOXIDE ALARM PER SECTION R315 IRC 2012.

INSULATED DOUBLE WALL @ TUB
 SCALE: 1/4"=1'-0"

OPT. ALT. UPPER FLOOR W/ ALT. FLOOR PLAN
 SHOWN W/ ELEVATION #6
 UNLESS OTHERWISE NOTED WINDOW HEAD HEIGHT SHALL BE 7'-4" ABOVE SUBFLOOR

1/4"=1'-0"

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