



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.: **817001396**

Building Address: 5450 Knoll North Drive
 City: Columbia State: MD Zip Code: 21045
 Suite/Apt. # 301 SDP/WP/BA #: _____
 Census Tract: 606601 Subdivision: Village of Oakland Mills
 Section: _____ Area: 2 Lot: A-2
 Tax Map: 30 Parcel: 313 Grid: 30-22
 Zoning: NT Map Coordinates: _____ Lot Size: 18.38 acres

Existing Use: Unoccupied
 Proposed Use: Medical Suite
 Estimated Construction Cost: \$ \$1,000,000
 Description of Work: Interior Fit-out

Occupant/Tenant Name: JH Ventures, LLC / JH Surgery Center Series
 Was tenant space previously occupied? Yes No
 Contact Name: Beth Plavner
 Address: 2330 W. Joppa Road, Suite 301
 City: Lutherville State: MD Zip Code: 21093
 Phone: 410-583-2460 Fax: 410-583-2581
 Email: bplavne1@jhml.edu

KNOLL NORTH GI ENDOSCOPY SUITE

Property Owner's Name: Healthcare Property Managers of America, LLC d/b/a Welltower
 Address: 5450 Knoll North Drive, Suite 370
 City: Columbia State: MD Zip Code: 21045
 Phone: 410-740-0470 Fax: 410-740-0471
 Email: esabat@welltower.com

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Greg Chin
 Address: 18310 Montgomery Village Ave.
 City: Gaithersburg State: MD Zip Code: 20879
 Phone: 301-590-2900 Fax: 301-590-8150
 Email: gc@wilmot.com

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

Engineer/Architect Company: Wilmot Sanz, Inc.
 Responsible Design Prof.: Matthew Camaller
 Address: 18310 Montgomery Village Ave.
 City: Gaithersburg State: MD Zip Code: 20879
 Phone: 301-590-2900 Fax: 301-590-8150
 Email: rnc@wilmot.com

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories: <u>3 plus penthouse</u>	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.): <u>4,400 SF</u>	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input checked="" type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities		
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Water Supply		
<input checked="" type="checkbox"/> Public		
<input type="checkbox"/> Private		
Sewage Disposal		
<input checked="" type="checkbox"/> Public		
<input type="checkbox"/> Private		
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Grading Permit Number:		
Building Shell Permit Number:		

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

Greg Chin
 Applicant's Signature
 gc@wilmot.com
 Email Address
 Project Architect / Wilmot Sanz, Inc.
 Title/Company

RECEIVED
APR 06 2017
 LICENSES & PERMITS
 DIVISION

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>4/27/17</u>	<u>Robert...</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>200.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>5651</u>



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

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

April 27, 2017

**RE: B17001396
5450 Knoll North Drive
Columbia, MD 21045**

To Whom It May Concern:

This letter is in response to building permit **B17001396**. The building permit application and plans indicate that the proposed work includes x-ray equipment that will need to be reviewed/registered with Maryland Department of the Environment, Air Quality Program, Air and Radiation Management Administration. If you have any questions you can contact the Air Quality Permits Program at (410) 537-3230.

Your building permit has been **approved** by this Department. I may be reached at 410 313-6357 if you would like to discuss the project in more detail.

Respectfully,
Robert Freemon

A handwritten signature in black ink, appearing to read 'Robert Freemon', is written over a horizontal line.

Well & Septic Program
Bureau of Environmental Health