

PERMIT NUMBER: B 21004043

DATE ACCEPTED:

RECEIVED

OCT 22 2021



RESIDENTIAL BUILDING PERMIT APPLICATION

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

BUILDING SITE ADDRESS REQUIRED

Street Address: 12451 KONDRUP DR Unit:
City: FULTON State: MD Zip Code: 20759
Subdivision/Village/Complex Name: BEAUFORT ESTA S1 RSB 15 SDP/WP/BA #:
Lot: 20 Tax Map: 45 Parcel: 14 Grading Permit #: GP-22-046

DESCRIPTION OF WORK REQUIRED

Existing Use: RESIDENTIAL Proposed Use: RESIDENTIAL Estimated Cost: \$ 195,000.00
Trade Work to Be Completed (Separate Permits Required): Mechanical (HVACR) Electrical Plumbing None

CONSTRUCT NEW 57'X97.5' (IRREG) 2-STORY SFD W/ PARTIALLY FINISHED BASEMENT, 24'2"X25' AND 24'X24' ATTACHED 2-CAR GARAGES, 25'5"X20' DECK W/ STAIRS AND RAMP TO GRADE, 45'X12' COVERED PORCH W/ RAMP TO GRADE, 5'X5' INTERIOR ELEVATOR

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): ROBERT ARMBRUSTER Primary Residence: Yes No
Owner's Street Address: 801 KEY HIGHWAY, UNIT 121
City: BALTIMORE State: MD Zip Code: 21230
Phone: (410) 980-9868 Email: DIANE.JAMESPERMITS@GMAIL.COM

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: SCHWALLENBERG'S PERMIT SVCS INC Contact Name: JAMES SCHWALLENBERG
Street Address: 1601 BISHOP RD
City: EDGEWATER State: MD Zip Code: 21037
Phone: (410) 980-9868 Email: DIANE.JAMESPERMITS@GMAIL.COM

CONTRACTOR INFORMATION REQUIRED

Business Name: CAIRN CUSTUM HOMES
Licensee's Name: STEVE APPLER License #: 7518
Street Address: 10548 GORMAN RD
City: LAUREL State: MD Zip Code: 20723
Phone: (410) 818-7382 Email: STEVE@CAIRNCUSTOMHOMES.COM

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: TRANSFORMING ARCHITECTURE Name: KAREN PITSLEY
Street Address: 7612 BROWNS BRIDGE RD
City: HIGHLAND State: MD Zip Code: 20777
Phone: (301) 776-2666 Email: INFO@TRANSFORMINGARCHITECTURE.COM

BUILDING CHARACTERISTICS REQUIRED

Primary Structure: SF Dwelling SF Townhouse SF Duplex Mobile Home Multi-Family Dwelling (MF\*) Condo: Yes No
Utilities: Electric Gas Water Supply: Public Private (Well) Sewage Disposal: Public Private (Septic)
Heating System: Electric Natural Gas Propane Other: Roadside Tree Project: No Yes: #
Sprinkler System: NFPA 13 NFPA 13R NFPA 13D None Fire Alarm System: Yes No Voice Evac

ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options:
# of Bedrooms (SF): 6 # of efficiency units (MF\*): # of 1 BR (MF\*): # of 2 BR (MF\*): # of 3 BR (MF\*):
# Rooms: 21 # Full Baths: 6 # Half Baths: 1 # Fireplaces: 2
Garage/Carport Info: Attached Garage Detached Garage Integral Garage Carport None
Basement/Foundation Info: Slab on Grade Post & Pier Unfinished Basement Finished Basement: Full or Partial
1st Fl Width: 57 1st Fl Depth: 97 2nd Fl Width: 65 2nd Fl Depth: 45 Bsmt Width: 72 Bsmt Depth: 41
Energy Method: Prescriptive Performance UA Alternative ERI Gross Area: 9,427 sq ft Occupiable Area: 6,171 sq ft

AGREEMENT/ DISCALIMER REQUIRED

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 [Signature]

DATE SIGNED 10/22/21

FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:

PR [checked] DPZ [ ] DED [checked] Health 11/1/21 [checked] SHA [ ] CID [ ]

SUBMITTAL FEES: 190 PAYMENT: 1000 ACCEPTED BY: [Signature]

\*NEED ENTRANCE PERMIT

Name: Robert Armbruster  
Street Address: 801 Key Highway, Unit 121  
City, State, Zip: Baltimore, MD 21230  
Date: 3/17/2022

Amendment, Permit # B21004043

Ms. Debbie Whalen  
Division of Plan Review  
Department of Inspections, Licenses and Permits  
Howard County Government  
3430 Court House Drive  
Ellicott City, MD 21043

**RECEIVED**

MAR 17 2022

LICENSES & PERMITS  
DIVISION

Dear Ms. Whalen:

I am requesting to amend Permit # B21004043 at  
12451 Kondrup Dr, Fulton, MD 20759 to  
Revise location of house on site plan

**Enclosed:**

- Fee: \_\_\_\_\_
- Plot Plans
- Sets of Construction Drawings
- Other: \_\_\_\_\_

If there is anything we can do to assist you, please let me know.

Sincerely,



Name: James Schwallenberg  
Title: Schwallenberg's Permit Svcs Inc  
Phone: 410-980-9868  
Email: diane.jamespermits@gmail.com

#1024 25.00



Menu Save Reset Cancel Help

Record Detail (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/New/SFD	B21004043	10/22/2021
Description of Work		
SFD/ CUSTOM/ 2 STORY, Full Basement, Basement = Unfinished, 21R, 6FB, 1HB, 2FP, 2 Two Car Garages, 6BR, Open Porch and Deck, ENERGY METHOD = Prescriptive Method, Subject to CB-76-2018./ INTERIOR ELEVATOR, RAMP FROM DECK TO GRADE & RAMP FROM PORCH TO GRADE		
<a href="#">check spelling</a>		

Address (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
12451	KONDRUP	DR	
Unit Type	Unit #	X Coordinate	Y Coordinate
--Select--		-76.944	39.14372
City	State	Zip Code	Primary
FULTON	MD	20759	Yes

Parcel (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
839933	14	3.06	270400	270400	0	RURAL
Legal Description						
LOT 20 3.0698 A[ ]12451 KONDRUP DR R/W[ ]BEAUFORT ESTA S1 RSB 15						
<a href="#">check spelling</a>						

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	20	605102	5				
Plan Area	State Tax Id	Subdivision Name					
	1405431166						
Section	Area	Tax Map					
		45					
Grid	Zoning District	ADC Map					
45-6	RR-DEO	5051-J8					
SDP No.	Final Plan No.	WP File No.					
Record Plat No.	WS Contract No.	FDP No.	Primary				
13702			Yes				
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	5-15A	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner (This section is not required.)

Search Reset Clear

Name \*

ROBERT ARMBRUSTER

Address Line 1

801 KEY HIGHWAY UNIT 121

Address Line 2

Address Line 3

Mail City

BALTIMORE

Mail State

MD

Mail Zip Code

21230

Phone

Primary

Yes

E-mail

Cell Number

Fax Number

Professionals (This section is not required.)

Search    Reset    Clear

License # *	Business Name		
7518	CAIRN CUSTOM HOMES		
License Type *	First Name	Middle Name	Last Name
Home Bldr	STEVE		APPLER
Primary	Address Line 1		
Yes	10548 GORMAN ROAD		
	Address Line 2		
	City	State	ZIP Code
	LAUREL	MD	20723
	Phone 1	Phone 2	Fax
	301-490-5317	410-818-7382	
	E-mail		
	STEVE@CAIRNCUSTOMHOMES.COM		

Applicant (This section is not required.)

Search    As Owner    As Lic. Prof    As Contact

Type *	First Name	MI	Last Name
Applicant	JAMES		SCHWALLENBERG
Relationship	Full Name		
Applicant	JAMES SCHWALLENBERG		
Primary	Organization Name		
No	SCHWALLENBERG'S PERMIT SERVICES INC		
	Street Address		
	1601 BISHOP ROAD		
	Address Line 2		
	City	State	Zip Code
	EDGEWATER	MD	21037
	Phone	Cell	Fax
	410-980-9868		
	E-mail *		
	diane.jamespermits@gmail.com		

Contact (This section is not required.)

Search    As Owner    As Lic. Prof    As Contact

Type	First Name	MI	Last Name
Contact	JAMES		SCHWALLENBERG
Relationship	Full Name		
Agent for Owner	JAMES SCHWALLENBERG		
Primary	Organization Name		
Yes	SCHWALLENBERG'S PERMIT SERVICES INC		
	Street Address		
	1601 BISHOP ROAD		
	Address Line 2		
	City	State	Zip Code
	EDGEWATER	MD	21037
	Phone	Cell	Fax
	410-980-9868		
	E-mail		
	diane.jamespermits@gmail.com		

Addl Info

Est Construction Cost *	Housing Units *	Number of Buildings *	Public Owned
195000	1	1	No
Construction Type			
101 - Single Family Houses Detached			

BUILDING INFORMATION

BUILDING INFORMATION

Capital Project-No Fee *	Capital Project #	Fee Exempt *	Roadside Tree Project Permit	Roadside Tree Project Permit #	Entrance Permit Req
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No		<input checked="" type="radio"/> Yes <input type="radio"/> No
Guaranty Fund *	Condominium	Existing Use	Model		
<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	Vacant Lot	SFD/ CUSTOM/		
No of Stories *	Foundation	Basement	No of Rooms *	Full Baths *	Half Baths *
2	Full Basement	Unfinished	21	6	1
Bedrooms *	Porch Deck	No of Fireplaces *	Type of Fireplace	Energy Code	Subject to CB-76-2018
6	Open Porch and Deck	2	--Select--	Prescriptive Method	Subject to CB-76-2018
W&S Fees Paid	Water Supply *	Sewage Disposal *	Utilities *	Heating System *	Sprinkler System *
<input type="radio"/> Yes <input type="radio"/> No	Private	Private	Electric	Electric	NFPA #13D
1st Floor Width	1st Floor Depth	2nd Floor Width	2nd Floor Depth	Basement Width	Basement Depth
				Height	Total Sq Ft *
					Occ Sq Ft *
					Affordable Housing Fund
					N/A

57 FT 97 FT 65 FT 45 FT 72 FT 41 FT 9427 SQFT 6171 SQFT

Building Construction Type:  Footings:  Foundation Measurement:  Walls:  Roof:

Location Survey Approval Date:  Road Frontage:  Expiration Date: 4/21/2022

U&O Issued On:

Additional Description Info: / INTERIOR ELEVATOR, RAMP FROM DECK TO GRADE & RAMP FROM PORCH TO GRADE

[check spelling](#) [check spelling](#)

GRADING INFORMATION

Grading Permit No: G21000229 Grading Certification Required:  Yes  No

Grading Certification Comments:

Grading Certification Received in DILP On:  Seasonal Surety Comments:

Grading Certification Received in CID On:

[check spelling](#) [check spelling](#)

Seasonal Grading Surety Depositor:  Driveway Apron Surety Depositor:  Stormwater Surety Depositor:

GREEN NEIGHBORHOOD INFORMATION

Check List Points Goal:  Check List Points Achieved:  Date of Certification:

PAYMENT INFORMATION

Check 1:  Payee 1:  Check 2:  Payee 2:  SAP Doc No:  SAP Entered:

PRIVATE ON LOT SWM FACILITIES

Green Roofs A1:  Yes  No Permeable Pavements A2:  Yes  No Reinforced Turf A3:  Yes  No

Disconnection of Rooftop Runoff N1:  Disconnection of Non Rooftop Runoff N2:  Yes  No Sheetflow to Conservation Areas N3:  Yes  No

Rainwater Harvesting M1:  Submerged Gravel Wetlands M2:  Landscape Infiltration M3:  Infiltration Berms M4:

Dry Wells M5:  Micro Bioretention M6:  Rain Gardens M7:  Swales M8:  Enhanced Filters M9:  PSWM Certification Received in CID on:

Related Records

Showing 1-2 of 2

Permit Number	Record Type Alias	Status	Number	Street Name	Opened Date	Description
G21000229	Residential Grading Permit	Review In Process	12451	KONDRUP	10/22/2021	BEAUFORT ESTATES/ GRADING & SEDIMENT CONTROLS - I
B21004043	Residential New Single Family Dwelling Permit	Pending Review	12451	KONDRUP	10/22/2021	SFD/ CUSTOM/, 2 STORY, Full Basement, Basement = Unfinish

Page 1 of 1

Submit Cancel

Record Detail \* (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Tanks	B22003252	08/22/2022
Description of Work		
SFD/ INSTALL 1000 GAL UNDERGROUND PROPANE TANK		

[check spelling](#)

Address \* (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type
12451	KONDRUP	DR
Unit Type	Unit #	X Coordinate
--Select--		-76.944
		Y Coordinate
		39.14372
City	State	Zip Code
FULTON	MD	20759
	Primary	
	Yes	

Approved 8/29/22  


Parcel \* (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
839933	14	3.06	215400	0	0	RURAL

Legal Description  
 LOT 20 3.0698 A[ ]12451 KONDRUP DR R/W[ ]BEAUFORT ESTA S1 RSB 15

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	20	605102	4				
Plan Area	State Tax Id	Subdivision Name					
	1405431166						
Section	Area	Tax Map					
		45					
Grid	Zoning District	ADC Map					
45-6	RR-DEO	5051-J8					
SDP No.	Final Plan No.	WP File No.					
Record Plat No.	WS Contract No.	FDP No.	Primary				
13702			Yes				
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	5-15A	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner \* (This section is required.)

Search Reset Clear

Name \*

ARMBRUSTER ROBERT

Address Line 1

801 KEY HIGHWAY

Address Line 2

UNIT 121

Address Line 3

Mail City

BALTIMORE

Phone

301-725-3232

E-mail

Mail State

MD

Mail Zip Code

21230

Primary

Yes

Cell Number      Fax Number

**Professionals** (This section is not required.)

Search      Reset      Clear

License # *	Business Name		
68408	HJ POIST		
License Type *	First Name	Middle Name	Last Name
Propane Gs	JEFF		WISEMAN
Primary	Address Line 1		
Yes	360 MAIN ST		
	Address Line 2		
	City	State	ZIP Code
	LAUREN	MD	20707
	Phone 1	Phone 2	Fax
	3017253232		
	E-mail		
	JEFF@HJPOIST.COM		

**Applicant** (This section is not required.)

Search      As Owner      As Lic. Prof      As Contact

Type *	First Name	MI	Last Name
Applicant	MICHELLE		CLANCY
Relationship	Full Name		
Applicant	MICHELLE CLANCY		
Primary	Organization Name		
Yes	APPLIED & APPROVED PERMITS LLC		
	Street Address		
	P.O. BOX 310		
	Address Line 2		
	City	State	Zip Code
	PERRY HALL	MD	21128
	Phone	Cell	Fax
	443-340-1229		
	E-mail *		
	MICHELLE@APPLIEDANDAPPROVED.COM		

**Addtl Info**

Est Construction Cost *	Housing Units *	Number of Buildings *	Public Owned
2500	0	0	No
Construction Type			
--Select--			

**TANK INFORMATION**

**RESIDENTIAL TANK INFORMATION**

Capital Project-No Fee *	Capital Project Number	Fee Exempt *	Roadside Tree Project Permit *	Roadside Tree Permit #
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Existing Use *	Number of Tanks Installed *	Number of Tanks Removed *		
SFD	1	0		
Water Supply	Sewage Disposal	Expiration Date	Relocate Existing Tank *	
Private	Private	2/25/2023	0	

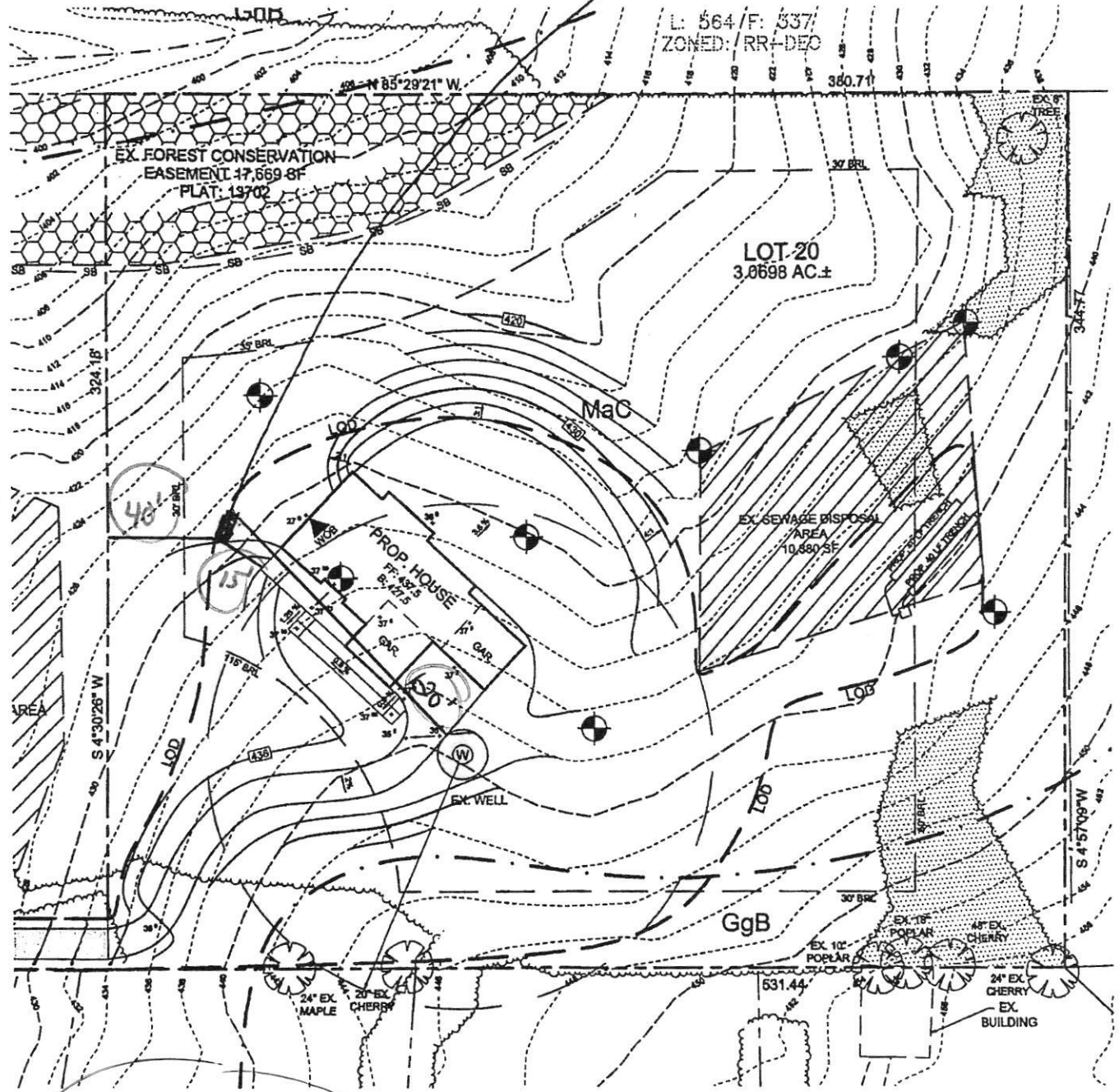
**PAYMENT INFORMATION**

Check 1	Payee 1	Check 2	Payee 2	SAP Doc No	SAP Entered

Submit      Cancel

tank location

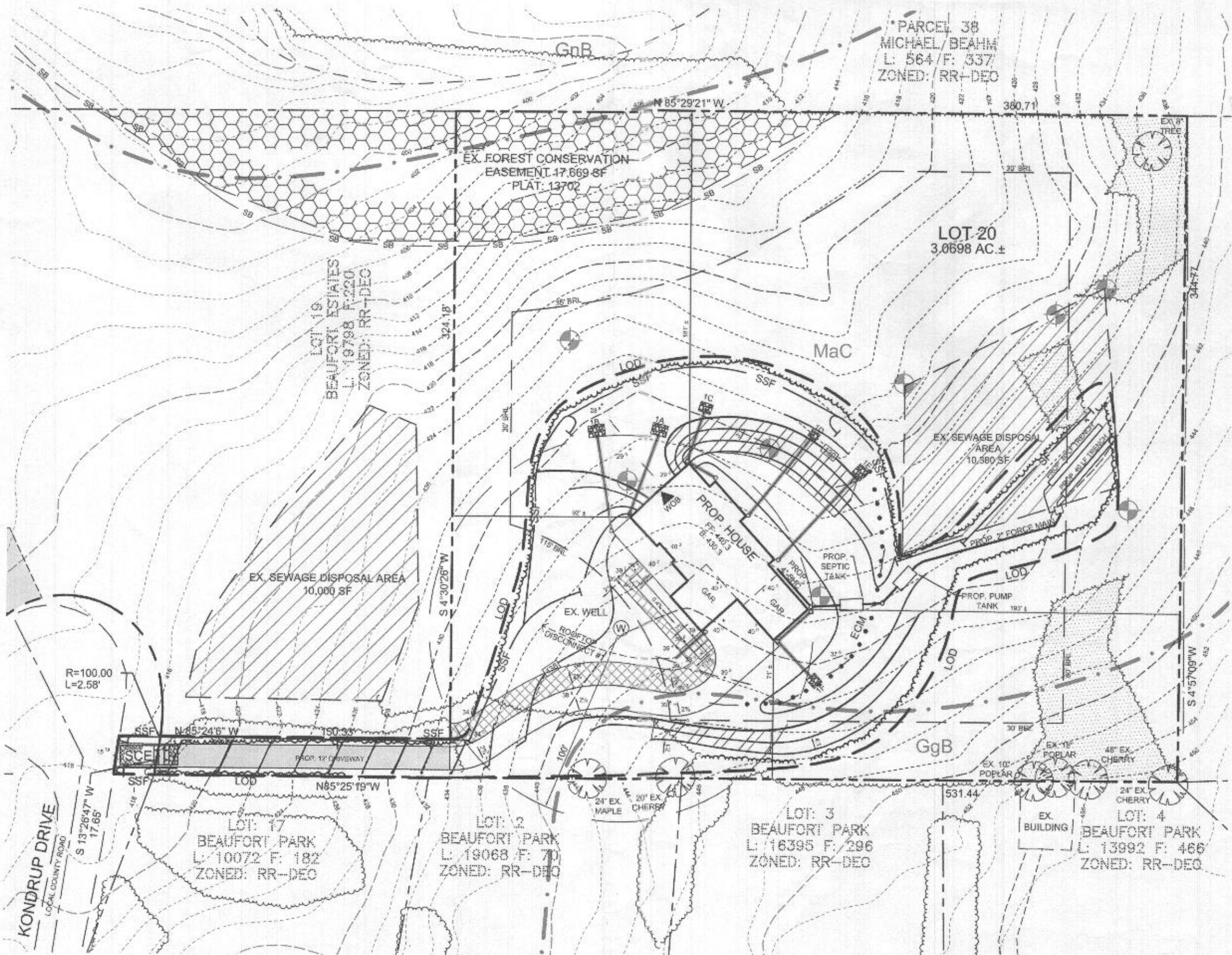
L: 564/F: 337  
ZONED: RR-DEC



Approved for LP tank  
 B 22003252  
 DA 8/29/22

12451 Kendrick Dr.  
 Scale  
 1" = 60'

SC1



BEAUFORT PARK  
 L: 10798 F: 220  
 ZONED: RR-DEC

KONDRUP DRIVE  
 LOCAL COUNTY ROAD

Scale: 1" = 50'