

DATE ACCEPTED:

PERMIT NUMBER: B 23003027

# COMMERCIAL 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: <b>8171 Maple Lawn Boulevard</b>		Unit: <b>100 &amp; 150</b>
City: <b>Fulton</b>	State: <b>MD</b>	Zip Code: <b>20759</b>
Subdivision/Village/Complex Name: <b>0000 - Maple Lawn Farms</b>		SDP/WP/BA #:
Lot: <b>C 3</b>	Tax Map: <b>0046</b>	Parcel: <b>0124</b>
Grading Permit #:		

## DESCRIPTION OF WORK REQUIRED

Existing Use: <b>Vacant Office</b>	Proposed Use: <b>Doctor's Offices</b>	Estimated Cost: \$ <b>594,738</b>
Trade Work to Be Completed (Separate Permits Required): <input checked="" type="checkbox"/> Mechanical (HVACR) <input checked="" type="checkbox"/> Electrical <input checked="" type="checkbox"/> Plumbing <input type="checkbox"/> None		
<b>Interior Alterations - Demo, New Wall, Electrical, Mechanical, Plumbing Work</b>		

**THI PERMIT W/ X-2**

## PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): <b>Maple Lawn Office I LLC</b>		
Owner's Street Address: <b>2560 Lord Baltimore Dr.</b>		
City: <b>Baltimore</b>	State: <b>MD</b>	Zip Code: <b>21244</b>
Phone: <b>410-788-0100</b>	Email: <b>Tlpermits@sjpi.com</b>	

## TENANT INFORMATION REQUIRED

Business Name: <b>Capital Women's Care</b>	Contact Name: <b>Ellen Quinn</b>
Street Address: <b>8171 Maple Lawn Boulevard, Suite 100 &amp; 150</b>	
City: <b>Fulton</b>	State: <b>MD</b>
Phone: <b>410-369-1247</b>	Email: <b>Tlpermits@sjpi.com</b>
Zip Code: <b>20759</b>	

## APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: <b>St John Properties, Inc</b>	Contact Name: <b>Ellen Quinn</b>
Street Address: <b>2560 Lord Baltimore Drive</b>	
City: <b>Baltimore</b>	State: <b>MD</b>
Phone: <b>410-788-0100</b>	Email: <b>Tlpermits@sjpi.com</b>
Zip Code: <b>21244</b>	

## CONTRACTOR INFORMATION REQUIRED

Business Name: <b>St John Properties, Inc.</b>	
Licensee's Name: <b>Mike Jones</b>	License #: <b>03920396</b>
Street Address: <b>2560 Lord Baltimore Drive</b>	
City: <b>Baltimore</b>	State: <b>MD</b>
Phone: <b>410-788-0100</b>	Email: <b>Tlpermits@sjpi.com</b>
Zip Code: <b>21244</b>	

## ARCHITECT/ENGINEER INFORMATION REQUIRED - INDIVIDUAL WHO SIGNED PLANS

Business Name: <b>Colimore Architects</b>	Name: <b>Ash Belgi</b>
Street Address: <b>1501 S. Clinton Street, 13th Floor</b>	
City: <b>Baltimore</b>	State: <b>MD</b>
Phone: <b>410-905-6958</b>	Email: <b>abelgi@colimore.com</b>
Zip Code: <b>21224</b>	

## BUILDING CHARACTERISTICS (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Utilities: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private (Well)	Sewage Disposal: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private (Septic)
Heating System: <input type="checkbox"/> Electric <input checked="" 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 checked="" type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> None	Fire Alarm System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac	

## ADDITIONAL COMMERCIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Area of Construction: <b>16,074</b> sq ft	Gross Area: <b>105,826</b> sq ft	Height: <b>45'-0"</b> ft	# of Stories: <b>3</b>
Construction Classification(s): <b>2B</b>		Use Group: <b>B</b> <b>B22002230 White Box</b>	
Was the tenant space previously occupied? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Shell Building Permit # (for interior completions): <b>B00149313</b>	

## ADDITIONAL MULTI-FAMILY INFORMATION IF APPLICABLE

# 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	

## 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

*[Signature]*  
APPLICANT'S ORIGINAL SIGNATURE

**7/28/2023**  
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 <b>8/9/23</b>	<input type="checkbox"/> SHA	<input type="checkbox"/> CID
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SUBMITTAL FEES: <b>\$200</b>	PAYMENT: <b>CK# 145635</b>	ACCEPTED BY: <b>AKH</b>
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## Oswald, Hank

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**From:** Oswald, Hank  
**Sent:** Wednesday, August 9, 2023 10:59 AM  
**To:** TIPERMITS@SJPI.COM  
**Subject:** B23003027\_8171 Maple Lawn Blvd\_Capitol Women's Care  
**Attachments:** X ray Equipment Notification\_2023.pdf

Hi Ms. Quinn:

Good morning. Attached, please find our standard x-ray notification letter regarding building permit # B23003027 for Capitol Women's Care located on 8171 Maple Lawn Blvd in Fulton.

Should you have any questions, please don't hesitate to ask.

Respectfully,

Hank

Hank Oswald  
Licensed Environmental Health Specialist  
Bureau of Environmental Health  
Howard County Health Department  
8930 Stanford Blvd. Columbia, MD 21045  
(410) 313 - 1786  
[www.hchealth.org](http://www.hchealth.org)

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

August 9, 2023

St. John Properties, Inc. (Applicant)  
2560 Lord Baltimore Drive  
Baltimore, MD 21244  
Attn: Ellen Quinn

Sent via email: [TIPERMITS@SJPI.COM](mailto:TIPERMITS@SJPI.COM)

RE: Building Permit # B23003027  
Capitol Women's Care (Tenant)  
8171 Maple Lawn Blvd, Suite 100 & 150  
Fulton, MD 20759

Dear Ms. Quinn:

This letter is in response to building permit **B23003027**. The building permit application and plans indicate that the proposed work includes x-ray related equipment that will need to be reviewed and registered with Maryland Department of the Environment, Air Quality Program, Air and Radiation Management Administration. If you have any questions, please contact the Air Quality Permits Program at (410) 537-3230.

Your building permit has been approved by this Department.

Respectfully,

*Hank Oswald*

Hank Oswald, L.E.H.S.  
Howard County Health Department  
Bureau of Environmental Health  
Well & Septic Program  
410) 313 - 1786