DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410)313-2455 INSPECTIONS (410)313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

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Building Address 12212 Running Fence	e Lane	Property Owner's Name			
Clarksville, MD 2102		Address And Addres			
Suite/Apt.#; SDP/WP/Pe	etition #:				
Census Tract Subdivision		City State Zip Code Home Phone Work Phone			
Section n/a Area n/a		Home Phone Work Phone Applicant's Name & Mailing Address, (if other than stated hereon):			
		Building Permit Services, Inc Pat Orla			
Tax Map <u>28</u> Parcel <u>74</u>		232-D Crocker Dr., Bel Air, MD 21014			
Zoning Map Coordinates	Lot size 40,111	Phone 410-879-7848 Fa	410-879-7847		
Existing Use Vacant Lot		Contractor Company Goodier Builders, Inc.			
Proposed Use SFD Estimated Construction Cost \$ 250,00	00.00	Contact Person Steve Appler			
Description of Work Const. SFD - 2 Sty		Address 10705 Charter Dr. Ste#350			
2HB,3 Car Gar,Sun Rm,opt FP,Fin L.I		City Columbia State MD Zip Code 21044			
	×	License No			
		Phone 410-997-7501 Fa			
Occupant or Tenant			Engineer or Architect Company		
Contact Name	<u> </u>	Contact Person			
Address		Address			
City State	Zip Code	City State Zip Code			
Phone Fax		Phone	Fax		
BUILDING DESCRIPTION -		BUILDING DESCRIPTION	N - <u>RESIDENTIAL</u>		
Building Characteristics	<u>Utilities</u>	Building Characteristics	<u>Utilities</u>		
Height:	Water Supply:	SF Dwelling 🗷 SF Townhouse 🗆	Water Supply:		
No. of stories:	Public Private	Depth Width 1st floor:	Y Public Private		
	Sewage Disposal: Public	2nd floor:	Sewage Disposal:		
Gross area, sq. ft. per floor:	Private	Basement:	X Public Private		
	Electric Yes No	Finished Basement Unfinished Basement Crawl space Slab on Grade	Electric Yes 🗷 No 🗆		
Use group: —	Gas Yes□ No□	No. of Bedrooms 5	Gas Yes ☑ No □		
	Heating System:	Multi-family dwellings: No. of efficiency units:	Heating System:		
Construction type: Reinforced Concrete	Electric Oil Natural Gas	No. of 1 BR units: No. of 2 BR units:	Electric □ Oil □ Natural Gas		
Structural Steel	Propane Gas	No. of 3 BR units:	Propane Gas		
Masonry Wood Frame	Sprinkler system: N/A □	Other Structure: Dimensions:	Sprinkler system: N/A		
	Full Partial	Footings: Roof:	NFPA # 13D NFPA#13R		
State Certified Modular	Other Suppression		Other:		
	# of Heads	State Certified Modular Manufactured Home			
WHICH ARE APPLICABLE HERETO: (4) THAT HE SHE WILL PERFORM NO	WORK ON THE ABOVE REFERENCED PROPERTY NOT SPE	N; (2) THAT THE INFORMATION IS CORRECT, (3) THAT HE SHE WILL COMP CITICALLY DESCRIBED IN THIS APPLICATION: (5) THAT HE SHE GRANTS			
THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITS	ED SON EVERTISM WATERPY	. Building Permit Services, Inc Pat O	rla		
Applicant's Signature	the second to the same	Print Name			
Agent Title/Company		7/7/10 Date			
	ceks payable to: DIRECTOR OF FIN. ** PLEASE WRITE NEATLY A				
	FOR OFFICE US	E ONLY -			
AGENCY DATE Land Development.DPZ	SIGNATURE APPROVAL		ROPERTY ID#: \$ 50.00		
Land Development.DPZ State Highways	·	Rear: Pe	rmit fee \$		
Building Official		Side: Ex	cise tax \$btotal paid \$		
Dev. Engineering. DPZ Health +127/10	Mew Enth	All minimum setbacks met? Ac	dd'l permit fee \$		
Fire Protection Is Sediment Control approval required prior			OTAL FEES \$		
YES.□\ NO □		YES□ NO□ CI	neck #		
CONTINGENCY CONSTRUCTI	ION START:	YES□ NO□	alidation #		
ONE STOP SHOP:		Lot Coverage for NewTown ZoneSDP/Red-line, approval date	Accepted by		
D1 - 11 - 12 - 12 - 12 - 12 - 12 - 12 -	o Official		G H GYY		
Distribution of Copies- White: Building	g Official Green: LDD, DPZ	Yellow: DED, DPZ Pink. He			
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