PERMIT NUMBER DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 HOWARD COUNTY B001372 PERMIT APPLICATION 155 INSPECTIONS (410)313-1810 Property Owner's Name | Auger Itul Mangs Address (2009 Sans Hill Manor & City Marriolkville State Mozip Code 21104 Estales C Home Phone Subdivision Applicant's Name & Mailing Address, (if other than stated hereon): 410 Phone 442 - 0405 Map Coordinates Existing Use Contact Person Jell Slutken Proposed Use SFWith 20+17 10.000 Estimated Construction Cost \$ Address 96 River Oaks Cr State Mn Zip Code 21208 -602-17212 Fax **Engineer or Architect Company** Possell Occupant or Tenant Auge Contact Person Contact Name Address Zip Code State City Zip Code State City Fax Phone Fax Phone BUILDING DESCRIPTION - RESIDENTIAL **BUILDING DESCRIPTION - COMMERCIAL** Utilities **Building Characteristics** Utilities **Building Characteristics** SF Dwelling SF Townhouse Water Supply: Water Supply: Height: Width Public Public / Private Private No. of stories: Sewage Disposal: Sewage Disposal: 2nd floor: Public Public / Private Private Gross area, sq. ft. per floor: Finished Basement 

Unfinished Basement Crawl space □ Slab on Grade □ Electric Yes D No D Electric Yes □ No □ No. of Bedrooms Yes□ No□ Gas Yes D No D Gas Use group: Multi-family dwellings: Heating System: No. of efficiency units: Heating System: Electric Oil No. of 1 BR units: Electric D Oil D Construction type: Natural Gas No. of 2 BR units: Reinforced Concrete Natural Gas No. of 3 BR units: Propane Gas Propane Gas Other Structure: Structural Steel Masonry Sprinkler system: N/A □ Sprinkler system: N/A □ Wood Frame Dimensions: NFPA #13D Footings: Full NFPA #13R Roof: Partial Other: Other Suppression State Certified Modular State Certified Modular # of Heads Manufactured Home SIGNED 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 COU Print Name Applicant's Si Date Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY PLEASE WRITE NEATLY AND LEGIBLY. \*\* - FOR OFFICE USE ONLY-PROPERTY ID# DPZ SETBACK INFORMATION SIGNATURE APPROVAL Filing fee Front Land Development, DPZ Permit fee. Rear: State Highways Excise tax Side: Building Official Sub-total paid MIN Side State Dev. Engineering, DPZ Add'l permit fee All minimum setbacks met? 11 oma 715/02 Health TOTAL FEES YES NO D Fire Protection Balance due Is Entrance Permit required? Is Sediment Control approval required prior to issuance? YES | NO. 1: 25 Check 1: 25 HY YES | NO | Validation Historic District? YES□ NO□ CONTINGENCY CONSTRUCTION START: Lot Coverage for NewTown Zone ONE STOP SHOP: Accepted by SDP/Red-line approval date Pink: Health Gold: SHA Yellow: DED, DPZ White: Building Official Green: LDD, DPZ Distribution of Copies-

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Rev. 10/15/98

