

Permits: 410-313-2455
Inspections: 410-313-1810
Automated Line: 410-313-3800

Howard County Building/Fire Permit Application
Department of Inspections, Licenses & Permits
3430 Court House Drive
Ellicott City, MD 21043

Permit Number:

B12000273

Building Address: 15328 Sweetbay Street
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Single Family Dwelling (New) Construction
Proposed Use: _____

Estimated Construction Cost: \$ 5500.00
Description of Work: Buy 1000 gallon propane tank and install gas line

Occupant or Tenant: _____

Was tenant space previously occupied? ☐ Yes ☐ No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

BUILDING DESCRIPTION - COMMERCIAL

| Building Characteristics | Utilities |
|---|---|
| Height: | <u>Water Supply</u> |
| No. of stories: | <input type="checkbox"/> Public |
| Gross area, sq. ft./floor: | <input type="checkbox"/> Private |
| | <u>Sewage Disposal</u> |
| Area of construction (sq. ft.): | <input type="checkbox"/> Public |
| | <input type="checkbox"/> Private |
| Use group: | Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <u>Construction type:</u> | <u>Heating System</u> |
| <input type="checkbox"/> Reinforced Concrete | <input type="checkbox"/> Electric <input type="checkbox"/> Oil |
| <input type="checkbox"/> Structural Steel | <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas |
| <input type="checkbox"/> Masonry | <u>Sprinkler System:</u> |
| <input type="checkbox"/> Wood Frame | <input type="checkbox"/> N/A |
| <input type="checkbox"/> State Certified Modular | <input type="checkbox"/> Full |
| <input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u> | <input type="checkbox"/> Partial |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Other Suppression |
| <u>Roadside Tree Project Permit #</u> | No. of Heads: |

Property Owner's Name: Union Chapel Road LLC
Address: 9025 Chevrolet Drive
City: Ellicott City State: MD Zip Code: 21042
Home Phone: _____ Work Phone: _____

Applicant's Name & Mailing Address, (If other than stated herein):

Phone: _____ Fax: _____

Email: _____

Contractor Company: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip Code: _____

License No.: _____

Phone: _____ Fax: _____

Email: _____

Engineer/Architect Company: _____

Responsible Design Prof.: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

BUILDING DESCRIPTION - RESIDENTIAL

| Building Characteristics | Utilities |
|--|---|
| <input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse | <u>Water Supply</u> |
| <u>Depth</u> <u>Width</u> | <input type="checkbox"/> Public |
| 1 st floor: | <input type="checkbox"/> Private |
| 2 nd floor: | <u>Sewage Disposal</u> |
| Basement: | <input type="checkbox"/> Public |
| <input type="checkbox"/> Finished Basement | <input type="checkbox"/> Private |
| <input type="checkbox"/> Unfinished Basement | Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Crawl Space | Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Slab on Grade | <u>Heating System</u> |
| No. of Bedrooms: | <input type="checkbox"/> Electric |
| <u>Multi-family Dwelling</u> | <input type="checkbox"/> Oil |
| No. of efficiency units: | <input type="checkbox"/> Natural Gas |
| No. of 1 BR units: | <input type="checkbox"/> Propane Gas |
| No. of 2 BR units: | |
| No. of 3 BR units: | |
| Other Structure: | |
| Dimensions: | |
| Footings: | <input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u> |
| Roof: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> State Certified Modular | <u>Roadside Tree Project Permit #</u> |
| <input type="checkbox"/> Manufactured Home | |

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 Signature _____

Print Name _____

Email Address _____

Date _____

Title/Company _____

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 | 2/6/12 | <i>[Signature]</i> |
| Fire Protection | | |

Is Sediment Control approval required for issuance? ☐ Yes ☐ No

☐ CONTINGENCY CONSTRUCTION START

☐ ONE STOP SHOP

| 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 | \$ |
| Permit Fee | \$ |
| Tech Fee | \$ |
| Excise Tax | \$ |
| PSFS | \$ |
| Guaranty Fund | \$ |
| Add'l per Fee | \$ |
| Total Fees | \$ |
| Sub- Total Paid | \$ |
| Balance Due | \$ |

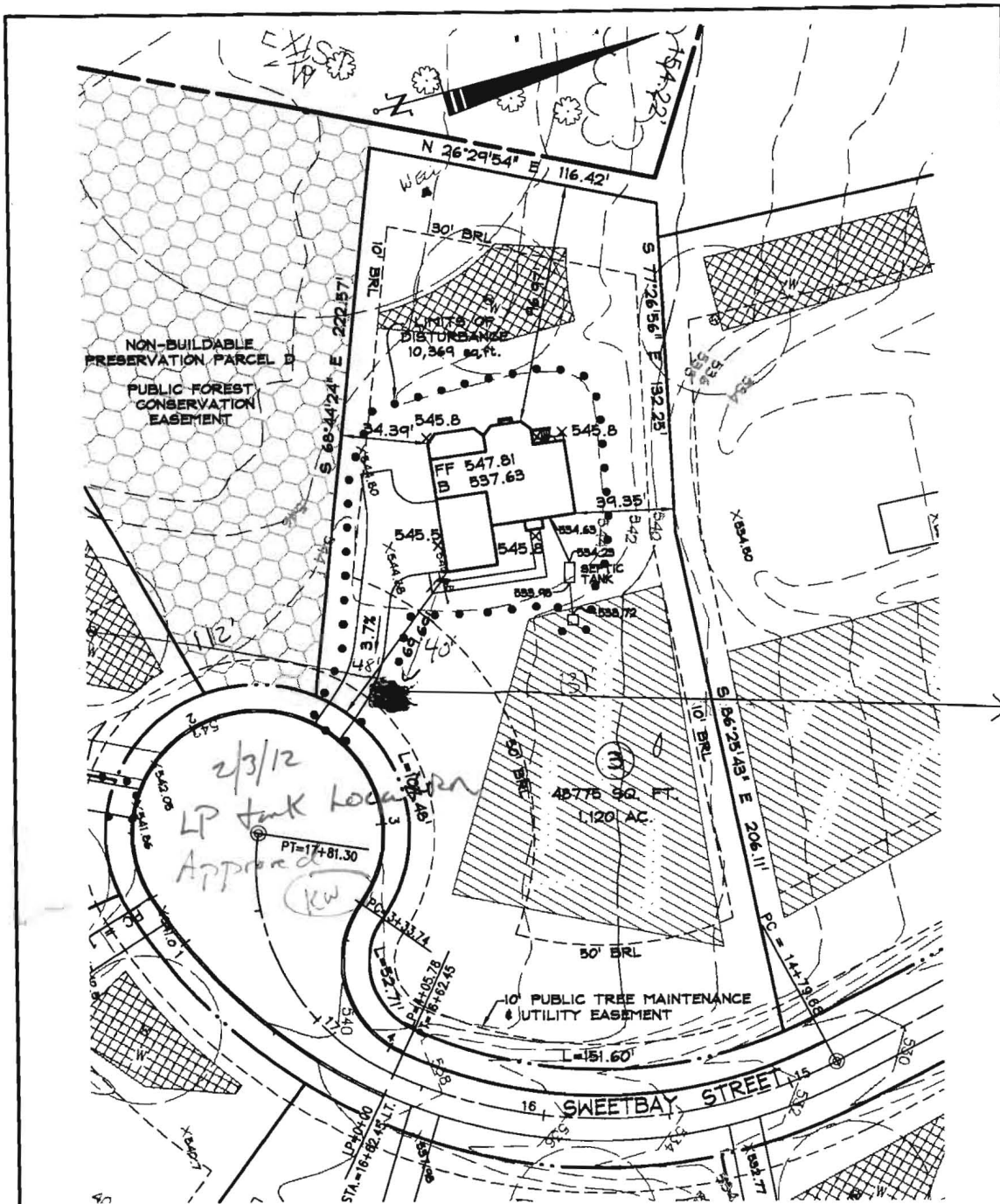
TANK TO
HOUSE 40'

112'
TANK TO WELL
ON NEAREST
PROPERTY

160' TANK
TO WELL

131' TANK TO
RIGHT PROPERTY
LINE

48' TANK TO
LEFT
PROPERTY
LINE



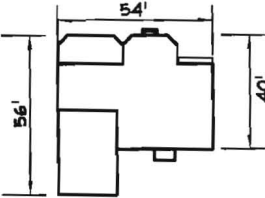
PROANE
TANK

OWNER

UNION CHAPEL ROAD, LLC
9025 CHEVROLET DRIVE
SUITE K
ELLCOTT CITY, MD 21042
(410)461-5900

BUILDER

GRAYSON HOMES
9025 CHEVROLET DRIVE
SUITE K
ELLCOTT CITY, MD 21042
(410)461-5900



LOT 3
CARLYLE
ELEVATION D
(REVERSE PLAN)

GENERAL NOTES

1. THE EXISTING WELL SHOWN ON THIS PLAN (HO-95-0657) HAS BEEN LOCATED BY DMW, PROFESSIONAL LAND SURVEYOR, AND IS ACCURATELY SHOWN.
2. BASE SQUARE FOOTAGE OF HOUSE: 3,089 sq. ft. NUMBER OF BEDROOMS: 4

#B12000273

INFORMATION SHOWN ON THIS PLAN
BASED ON PLANS PREPARED BY
DMW DATED 6/25/07. EXISTING
TOPO BASED ON A GRADING PLAN
PREPARED BY DEMARIO DESIGN
CONSULTANTS DATED 7/9/07.

BELLE HAVEN ESTATES LOT 3

15328 SWEETBAY STREET
WOODBINE, MD 21797

PLOT PLAN CARLYLE - ELEVATION D

3rd ELECTION DISTRICT HOWARD COUNTY, MD



192 East Main Street
Westminster, MD 21157
http://www.demariodesign.us
Phone: (410) 386-0560
Fax: (410) 386-0564

| | | |
|-----------------|----------------------|-------------------|
| DATE: 10/4/10 | CHKD. BY: JLM | DRAWN. BY: LJC |
| SCALE: 1" = 50' | TAX MAP 14 PARCEL 66 | DDC JOB#: 06116.1 |

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

PERMIT NUMBER

B1-02989

Building Address **15328 SWEETBAY ST.**
WOODBINE, MD 21797

Property Owner's Name **UNION CHAPEL RD. LLC**Address **9025 Chevrolet Dr. st. K**

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision **Belle Haven Est.**Section _____ Area _____ Lot **3**

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size _____

City **ELLICOTT CITY MD** State _____ Zip Code **21042**Home Phone _____ Work Phone **410-461-5900**Applicant's Name & Mailing Address, (if other than stated hereon):
Vicky MeyerPhone **410-296-6900** Fax **410-296-7992**Existing Use **vacant land**Proposed Use **NEW SFD**Estimated Construction Cost \$ **375,000**Description of Work **CONSTRUCT NEW SFD - Carlye house type. w/3 Car Side****Entry Garage, 2 stories, unfin. basement. 4 bedrooms.****4 bathrooms., FP, 2' rear ext. LIBRARY Opt. and****SOLARIUM opt.**Contractor Company **BELLE HAVEN EST. LLC**Contact Person **Deb Turner or Vicky Meyer**Address **9025 Chevrolet Dr. Ste. k**City **Ellicott City, MD** State _____ Zip Code **21042**License No. **5837**Phone **410-461-5900** Fax _____Occupant or Tenant **see owner**

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company **DeMario Design Consult**Contact Person **LORRIECunningham**Address **192 E. MAIN ST.**City **Westminster** State **MD** Zip Code **21157**Phone **410-386--0560** Fax _____**BUILDING DESCRIPTION - COMMERCIAL****BUILDING DESCRIPTION - RESIDENTIAL****Building Characteristics****Utilities**

Height: _____

No. of stories: _____

Gross area, sq. ft. per floor: _____

Use group: _____

Construction type: _____

____ Reinforced Concrete

____ Structural Steel

____ Masonry

____ Wood Frame

____ State Certified Modular

Water Supply: _____

____ Public

____ Private

Sewage Disposal: _____

____ Public

____ Private

Electric Yes ☐ No ☐Gas Yes ☐ No ☐

Heating System: _____

Electric ☐ Oil ☐Natural Gas ☐Propane Gas ☐Sprinkler system: N/A ☐

____ Full

____ Partial

____ Other Suppression

____ # of Heads

Building Characteristics**Utilities**SF Dwelling ☒ SF Townhouse ☐

Depth _____

Width _____

1st floor: _____

2nd floor: _____

Basement: _____

Finished Basement ☐ Unfinished Basement ☐Crawl space ☐ Slab on Grade ☐

No. of Bedrooms _____

Height: _____

Multi-family dwellings: _____

No. of efficiency units: _____

No. of 1 BR units: _____

No. of 2 BR units: _____

No. of 3 BR units: _____

Other Structure: _____

Dimensions: _____

Footings: _____

Roof Height: _____

____ State Certified Modular

____ Manufactured Home

Water Supply: _____

____ Public

____ Private

Sewage Disposal: _____

____ Public

____ Private

Electric Yes ☐ No ☐Gas Yes ☐ No ☐

Heating System: _____

Electric ☐ Oil ☐Natural Gas ☐Propane Gas ☐Sprinkler system: N/A ☒

____ NFPA #13D

____ NFPA #13R

____ Other: _____

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 Signature

AGENT, MD BLDG. PERMITS, INC.

Title/Company

Print Name

VICKIEA MEYER

Sept. 24, 2010

Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

** PLEASE WRITE NEATLY AND LEGIBLY. **

- FOR OFFICE USE ONLY -

AGENCY DATE SIGNATURE APPROVAL

Land Development, DPZ

State Highways

Building Official

Dev. Engineering, DPZ

Health

Fire Protection

Is Sediment Control approval required prior to issuance?

YES ☐ NO ☐CONTINGENCY CONSTRUCTION START: ☐ONE STOP SHOP: ☐

Distribution of Copies-

White: Building Official

Green: LDD, DPZ

Yellow: DED, DPZ

Pink: Health

Gold: SHA

T:\forms\PERMIT.FRM

DPZ SETBACK INFORMATION**PROPERTY ID#:**

Front: _____

Filing fee \$ **100**

Rear: _____

Permit fee \$ _____

Side: _____

Excise tax \$ _____

Side St.: _____

Add'l per. fee \$ **50**

All minimum setbacks met?

TOTAL FEES \$ _____

YES ☐ NO ☐

Sub-total paid \$ _____

Is Entrance Permit required?

Balance due \$ _____

YES ☐ NO ☐Check # **2627**

Historic District?

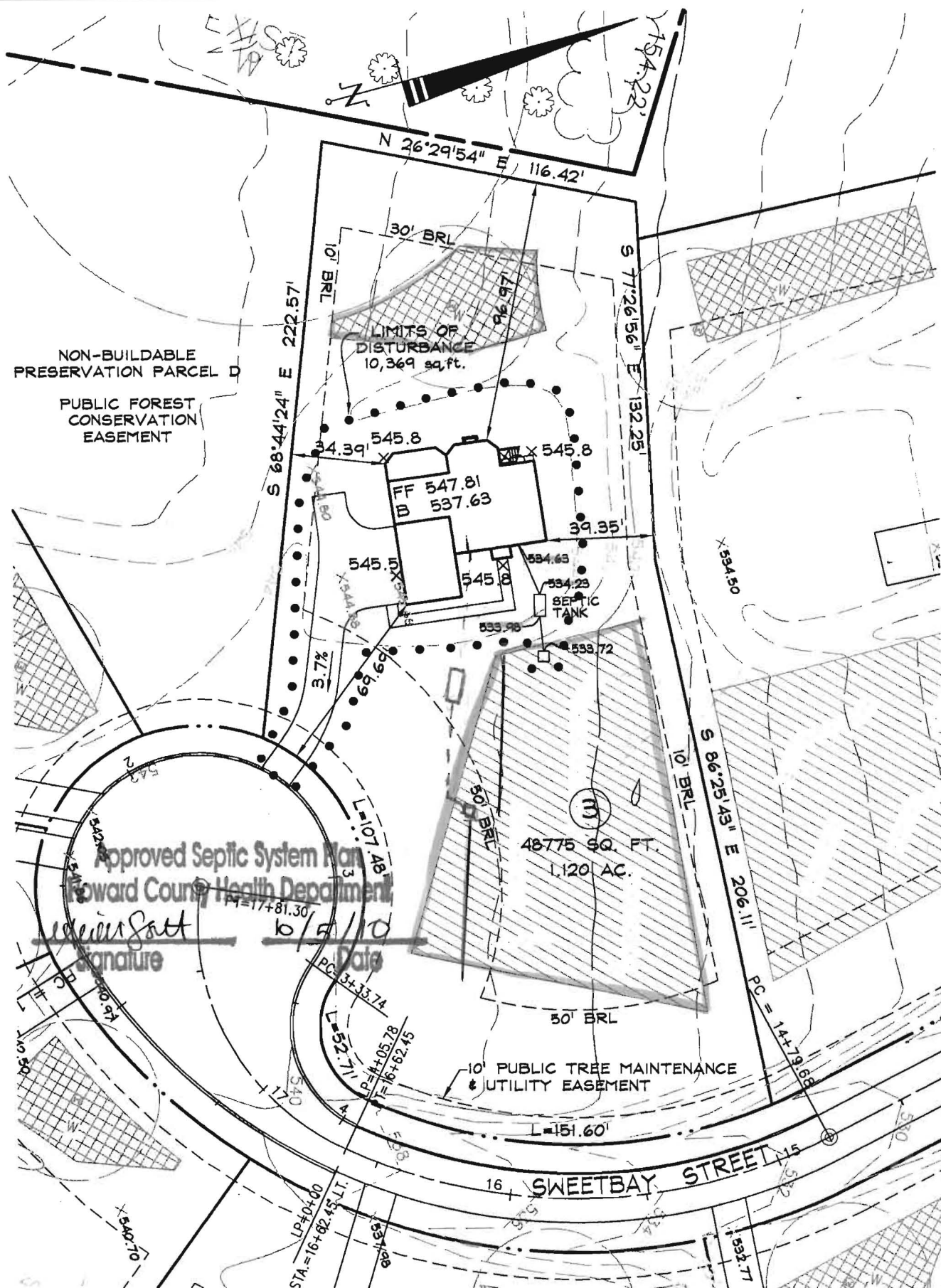
Validation # _____

YES ☐ NO ☐

Lot Coverage for NewTown Zone _____

SDP/Red-line approval date _____

Accepted by _____



BELLE HAVEN ESTATES
LOT 3

15328 SWEETBAY STREET
WOODBINE, MD 21797

PLOT PLAN

CARLYLE - ELEVATION D

3rd ELECTION DISTRICT HOWARD COUNTY, MD

DeMario
DESIGN CONSULTANTS

ENGINEERS, PLANNERS, SURVEYORS, LANDSCAPE ARCHITECTS

192 East Main Street
Westminster, MD 21157
<http://www.demariodesign.us>
Phone: (410) 386-0560
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DATE: 10/4/10

CHK'D. BY: JLM

DRAWN. BY: LJC

SCALE: 1" = 50'

TAX MAP 14 PARCEL 66

DDC JOB#: 06116.1