DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3490 COURT HOUSE ORIVE
BLICOTT CITY, MD 21045
PERMITS (410) 313-3455 INSPECTIONS (410) 313-3450

Distribution of Copies-T:\forms\PERMIT.FRM White: Building Official

## HOWARD COUNTY

Walk-Thru

PERMIT NUMBER

Accepted by\_\_\_\_

Rev. 11/4//04

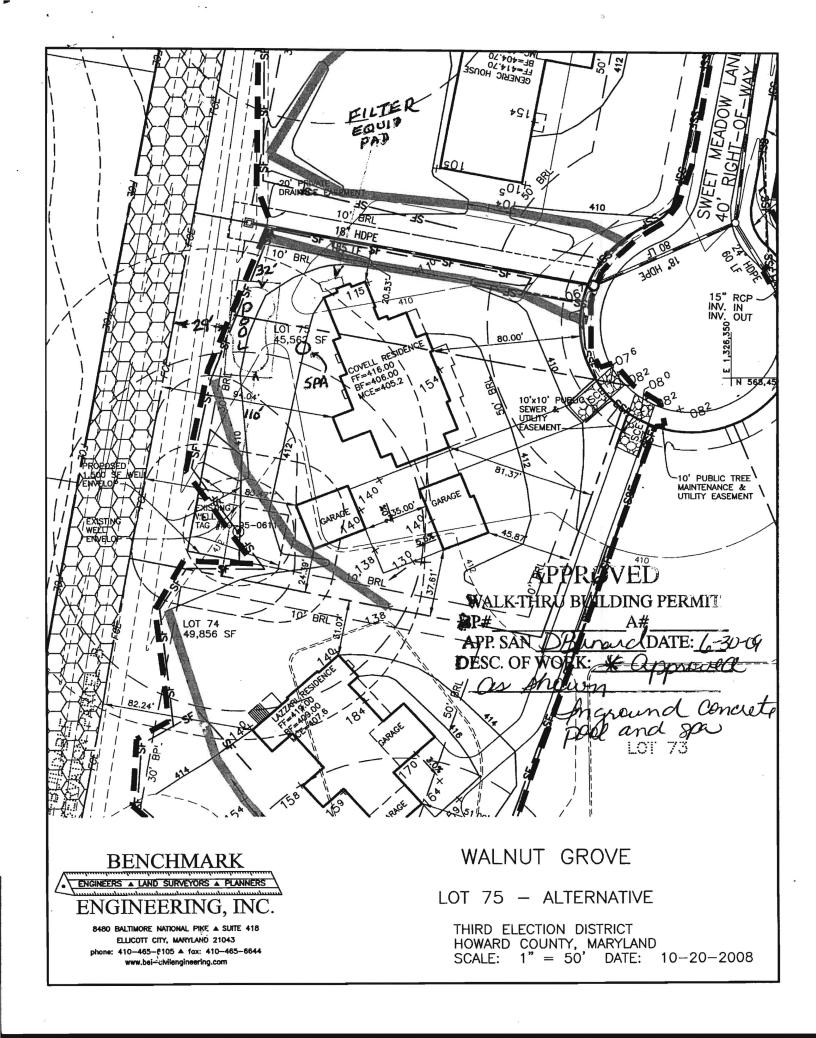
Pink: Health Gold: SHA

And American Street Str	PERMIT AP	PLICATION   DOTO	1540		
Building Address - OT 75 WALNUT		Property Owner's Name DARRELL	SMELISSA COVELL		
5227 SWEET MEADOW LA	CLARK SVILLE MD 21029	Address 5222 SWEET MEADO	WLA		
Suite/Apt. #: SDP/WP/Pe	tition #;	City CLARKSVILLE State			
Census Tract Subdivision		Phone Phone Phone Applicant's Name & Mailing Address, (if other than stated hereon):  PAVL HORICHS PLEASURE PAUL 5			
SectionArea					
Tax Map Parcel		Phone 410 833 0850 Fax 41			
Zoning Map Coordinates	Lot size	710 8 33 0 830 41	8 364 20 /3		
Existing Use 5FD		Contractor Company RE Pool 5			
Proposed Use SFD / POOL		Contact Person PAUL HORICHS			
Estimated Construction Cost \$ 60	4		,		
Description of Work unstall man	own concrett pool	Address 05 BERRYMANS	-A		
* Special Control of the Control of		City REISTERSTOWN State License No. MHIC 1228 Phone 410 833 0850 Fax 4	MD Zip Code 2//36		
Occupant or Tenant					
Contact	Occupant or Tenant Contact		Engineer or Architect Company  Contact Person		
Name	The state of the s	·			
AddressState_	7in Code	Address	and the state of t		
	2,0000	City State Zip Code			
Phone Fax		Phone Fax			
BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL			
Building Characteristics	<u>Utilities</u>	Building Characteristics	<u>Utilities</u>		
Height:	Water Supply: Public	SF Dwelling SF Townhouse Depth Width	Water Supply:Public		
No. of stories:	Private Sewage Disposal:	1st floor:	Private Sewage Disposal:		
Gross area, sq. ft. per floor:	Public Private	Basement:	Public Private		
Gross area, sq. is, per moor,	***************************************	Finished Basement   Unfinished Basement	Electric Yes  No		
Use group:	Electric Yes O No O Gas Yes O No O	Crawl space  Slab on Grade  No. of Bedrooms	Gas Yes□ No □		
	Heating System:	Height: Multi-family dwellings:	Heating System: Electric □ Oil □		
Construction type:Reinforced Concrete	Electric  Oil  O	No. of efficiency units: No. of 1 BR units:	Natural Gas D Propane Gas D		
Structural Steel Masonry	Propane Gas	No. of 2 BR units: No. of 3 BR units:			
Wood Frame	Sprinkler system: N/A □	Other Structure:	Sprinkler system: N/A  NFPA #13D		
	Full Partial	Dimensions:	NFPA #13R Other:		
State Certified Modular	Other Suppression # of Heads	Footings:Roof Height:	CMICI.		
,		State Certified Modular Manufactured Home			
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOW HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT FOR CITIES AND THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE	IE/SHE WILL PERFORM NO WORK ON THE ABOVE	S APPLICATION; (2)THAT THE INFORMATION IS CORRECT; (3) THAT REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS A AND POSTING NOTICES.	HE/SHE WILL COMPLY WITH ALL REGULATIONS OF PPLICATION; (5) THAT HE/SHE GRANTS COUNTY		
	,	AND THE RESIDENCE OF THE PARTY	mandanin 6.		
Applicant's Signature		Print Name			
Title/Company	Checks payable to: DIRECTOR O	Date F FINANCE OF HOWARD COUNTY	A CONTRACTOR OF THE CONTRACTOR		
	" PLEASE WRITE NE	EATLY AND LEGIBLY. ** CE USE ONLY -			
AGENCY	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:		
Land Development, DPZ State Highways		A STATE OF THE PARTY OF THE PAR	ing fee \$mit fee \$		
Building Official	A FREEDOM CONTRACT OF THE		cise tax \$		
Dev. Engineering, DPZ	The second of the second of	Side St.:	ld'I per, fee \$		
Health (0-30-01		All and a second a	TAL FEEC C		
Circ Protection	Nana Denna		DTAL FEES \$		
Fire Protection  Is Sediment Control approval required prior to			ab-total paid \$		
		YES NO SI Is Entrance Permit required? Ba	ab-total paid \$		
Is Sediment Control approval required prior to	o issuance?	YES □ NO □ Sulfamented Sulfam	ab-total paid \$		

SDP/Red-line approval date

Yellow: DED, DPZ

Green: LDD, DPZ



DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3400 COURT HOUSE DRIVE PERMITS 1500 COURT HOUSE DRIVE PERMITS 1410 ALL 2005 INSPECTIONS (410) 315-1810 AUTOMATED INFORMATION (410) 315-3800		COUNTY PPLICATION	PERMIT Bodge	NUMBER
Suilding Address 57.22 Su	Jest Mentallane	Property Owner's Name		arry - Melisse G
Clarby IC	Mb 21-29	Address 3/80	River VA	K, Chaz
Suite/Apt. #: SDP/WP/Pet	tition #:	1 1	1	)
Census Tract Subdivision	Walnut Grave	City Who Fire	State MD	Zip Code 21714
Section Area	Lot	Home Phone 4 Applicant's Name & Maili	ng Address, (if other tha	n stated hereon):
Zoning Map Coordinates	Lot size ACV	Phone 412-531-6		
Existing Use VACAAT Coroposed Use New Smith F	This by Durthy	Contractor Company	1 2 10 1 1	J. Bullis
Estimated Construction Cost \$	story with loff	Contact Person	M HAGEN	~ 1
Description of vvork	5 Full Both,	Address 4781	TEN. ONKS	Aud alex
2 HB 2 pro-tal F/	CAL GEVERA	City License No. Phone	State Albara	Zip Code 41030
Occupant or Tenant	1	Engineer or Architect Co	mpany Arth. L-t	1 Callabora
Contact Name_	-	Contact Person	VIJAI	
AddressState	Zip Code	Address 8334 MAIN ST		
Phone Fax		City Ellis City State MD Zip Code 21013		
Tax		Phone 410-445-1	1500 Fax 410	-463-69-3
BUILDING DESCRIPTION	- <u>COMMERCIAL</u>		DING DESCRIPTION	RESIDENTIAL
Building Characteristics	<u>Utilities</u>	Building Charac	2	<u>Utilities</u>
-leight:	Water Supply: Public	SF Dwelling SF Tow Depth	wnhouse  Wa Width	ter Supply: Public
No. of stories:	Private	1st floor: (	144 X	Private
	Sewage Disposal: Public	2nd floor: Basement:	1	vage Disposal: _ Public
Gross area, sq. ft. per floor:	Private	Finished Basement Unfin	nished Basement□	Private
	Electric Yes  No	Crawl space  Slab on C	Grade □ Ele	ctric Yes 🛭 No 🗆
Use group:	Gas Yes□ No□	Height: Multi-family dwellings:	Gas	Yes □ No □
1. Lyn. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Heating System:	No. of efficiency units:	Hea	ting System:
Construction type: Reinforced Concrete	Electric D Oil D	No. of 1 BR units:		ctric 🖬 Oil 🗖
Structural Steel	Natural Gas □	No. of 3 BR units:		pane Gas 🛘
	Propane Gas	No. of 3 BK dims.	7,	and the same of th
Masonry	100 1016	Other Structure:	Con	
그 그리고 그리고 있는데 그리고 있는데 그리고 있다면 그리고 있는데 그리고 있는데 그리고 있는데 그리고 있다면	Propane Gas □ Sprinkler system: N/A □ Full	Other Structure: Dimensions: Footings:	Con	inkler system: N/A 🖽 NFPA#13D
Masonry Wood Frame	Sprinkler system: N/A □ Full Partial	Other Structure:	Con	inkler system: N/A 🖂
Masonry Wood Frame State Certified Modular	Sprinkler system: N/A  Full Partial Other Suppression # of Heads	Other Structure: Dimensions: Footings: Roof Height:  State Certified Mod Manufactured Hom	Spr Jular	inkler system: N/A ☐ _ NFPA #13D _ NFPA #13R _ Other:
Masonry Wood Frame State Certified Modular	Sprinkler system: N/A  ——Full ——Partial ——Other Suppression ——# of Heads	Other Structure: Dimensions: Footings: Roof Height: State Certified Mod Manufactured Hom LICATION; (2)THAT THE INFORMATION IS CORENCED PROPERTY NOT SPECIFICALLY DE	Spr  Iuliar  Be  ORRECT; (3) THAT HE/SHE WILL CON SCRIBED IN THIS APPLICATION; (5) T	inkler system: N/A 🗐 NFPA #13D NFPA #13R Other:
Masonry Wood Frame State Certified Modular	Sprinkler system: N/A  ——Full ——Partial ——Other Suppression ——# of Heads	Other Structure: Dimensions: Footings: Roof Height: State Certified Mod Manufactured Hom LICATION; (2)THAT THE INFORMATION IS CORENCED PROPERTY NOT SPECIFICALLY DE	Spr.	inkler system: N/A 🗐 NFPA #13D NFPA #13R Other:
Masonry Wood Frame State Certified Modular  State Certified Modular  UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: ( WARD COUNTY WHICH ARE APPLICABLE THERETO: (4) THAT HEIS RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I	Sprinkler system: N/A  ——Full ——Partial ——Other Suppression ——# of Heads	Other Structure: Dimensions: Footings: Roof Height: State Certified Mod Manufactured Hom LICATION; (2)THAT THE INFORMATION IS CORENCED PROPERTY NOT SPECIFICALLY DE	Spr  Iuliar  Be  ORRECT; (3) THAT HE/SHE WILL CON SCRIBED IN THIS APPLICATION; (5) T	inkler system: N/A 🗐 NFPA #13D NFPA #13R Other:
Masonry Wood Frame State Certified Modular  E UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: ( WARD COUNTY WHICH ARE APPLICABLE THERETO: (4) THAT HE'S E RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I	Sprinkler system: N/A  Full Partial Other Suppression # of Heads  That he/she is authorized to make this apple he will perform no work on the above refer inspecting the work permitted and posting in the work permitted and permitted an	Other Structure: Dimensions: Footings: Roof Height: State Certified Mod Manufactured Hom LICATION; (2)THAT THE INFORMATION IS CORRENCED PROPERTY NOT SPECIFICALLY DE ROTICES.  Print Name  FEINANCE OF HOWARD CO	Spr  Luiar  e  DRRECT; (3) THAT HE/SHE WILL CON SCRIBED IN THIS APPLICATION; (5) T	inkler system: N/A II _NFPA #13D _NFPA #13R _Other:
Masonry Wood Frame State Certified Modular  LUNDERSKENED HEREBY CERTIFIES AND AGREES AS FOLLOWS: ( WARD COUNTY WHICH ARE APPLICABLE THERETO: (4) THAT HEIS RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I	Sprinkler system: N/A  Full Partial Other Suppression # of Heads  That He/she is authorized to make this apple he will perform no work on the above refer inspecting the work permitted and posting in the work permitted and permit	Other Structure: Dimensions: Footings: Roof Height: State Certified Mod Manufactured Hom LICATION; (2)THAT THE INFORMATION IS CORRENCED PROPERTY NOT SPECIFICALLY DE ROTICES.  Print Name  FEINANCE OF HOWARD CO	Spr  Luiar  e  DRRECT; (3) THAT HE/SHE WILL CON SCRIBED IN THIS APPLICATION; (5) T	inkler system: N/A 🗐 NFPA #13D NFPA #13R Other:
Masonry Wood Frame State Certified Modular  UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: ( NARD COUNTY WHICH ARE APPLICABLE THERETO, (4) THAT HEIS RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I	Sprinkler system: N/A   Full Partial Other Suppression # of Heads  That He/she is Authorized to Make this Apple He will perform no work on the Above refersionspecting the work permitted and posting in the work permitted and perm	Other Structure; Dimensions: Footings: Roof Height: State Certified Mod Manufactured Hom LICATION; (2)THAT THE INFORMATION IS OF RENCED PROPERTY NOT SPECIFICALLY DE OTICES.  Print Name  FFINANCE OF HOWARD COATLY AND LEGIBLY. ** EUSE ONLY- DPZ SETBACK II	Juliar  Be  DORRECT; (3) THAT HE/SHE WILL CON SCRIBED IN THIS APPLICATION; (5) TO  DUNTY	INKIER SYSTEM: N/A E NFPA #13D NFPA #13D NFPA #13R Other:  PLY WITH ALL REGULATIONS OF HAT HE/SHE GRANTS COUNTY OFFICE PROPERTY ID#:
Masonry Wood Frame State Certified Modular  UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: ( NARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/S RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I	Sprinkler system: N/A   Full Partial Other Suppression # of Heads  That He/she is Authorized to Make this applied will perform no work on the above refer inspecting the work permitted and posting in the work permitted and permitted an	Other Structure; Dimensions: Footings: Roof Height: State Certified Mod Manufactured Horn LICATION; (2) THAT THE INFORMATION IS OR RENCED PROPERTY NOT SPECIFICALLY DE LOTICES.  Print Name  Print Name  FFINANCE OF HOWARD CO LATLY AND LEGIBLY. ** E USE OMLY-  DPZ SETBACK II  Front:	Juliar  DORRECT; (3) THAT HE/SHE WILL COMPACTION; (5) TO THE SCRIBED IN THIS APPLICATION; (6) TO THE SCRIBED IN THE SCRIB	INKIER SYSTEM: N/A III NFPA #13D NFPA #13D NFPA #13R Other:  PLY WITH ALL REGULATIONS OF HAT HE/SHE GRANTS COUNTY OFFICE PROPERTY ID#:
Masonry Wood Frame State Certified Modular  UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: ( WARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/S RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I	Sprinkler system: N/A FullPartialOther Suppression# of Heads  1) That He/she is Authorized to Make this Appl the WILL PERFORM NO WORK ON THE ABOVE REFER INSPECTING THE WORK PERMITTED AND POSTING IN  Checks payable to: DIRECTOR OF  ** PLEASE WRITE NE - FOR OFFICE SIGNATURE APPROVAL	Other Structure: Dimensions: Footings: Roof Height: State Certified Mod Manufactured Hom Lication; (2)THAT THE INFORMATION IS OR RENCED PROPERTY NOT SPECIFICALLY DE LOTICES.  Print Name  Print Name  Deta FFINANCE OF HOWARD CO ATLY AND LEGIBLY. **  DPZ SETBACK II  Front: Reer.	Juliar Ie  ORRECT; (3) THAT HE/SHE WILL COM SCRIBED INTHIS APPLICATION; (5) TO  OUNTY  NFORMATION Filling fee Permit fee	INFPA #13D  NFPA #13D  NFPA #13R  Other:  PLY WITH ALL REGULATIONS OF HAT HE/SHE GRANTS COUNTY OFFICE  PROPERTY ID#:
Masonry Wood Frame State Certified Modular  State Certified Modular  UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: ( WARD COUNTY WHICH ARE APPLICABLE THERETO: (4) THAT HEIS RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I  POLICANT'S Signature  GENCY DATE  10 Development D P7  10 Highways Iding Omicial From meeting DP	Sprinkler system: N/A FullPartialOther Suppression# of Heads  1) That he/she is authorized to make this applied with the work on the above refer in specting the work permitted and posting in the work permitted and posting i	Other Structure; Dimensions: Footings: Roof Height: State Certified Mod Manufactured Horn LICATION; (2) THAT THE INFORMATION IS OR RENCED PROPERTY NOT SPECIFICALLY DE LOTICES.  Print Name  Print Name  FFINANCE OF HOWARD CO LATLY AND LEGIBLY. ** E USE OMLY-  DPZ SETBACK II  Front:	Juliar Ie  ORRECT; (3) THAT HE/SHE WILL COM SCRIBED INTHIS APPLICATION; (5) TO  OUNTY  NFORMATION Filing fee Permit fee Excise tax	INKIER SYSTEM: N/A E NFPA #13D NFPA #13D NFPA #13R Other:  PLY WITH ALL REGULATIONS OF HAT HEISHE GRANTS COUNTY OFFICE PROPERTY ID#:
Masonry Wood Frame State Certified Modular  Eundersigned Hereby Certifies and Agrees as Follows: ( WARD COUNTY WHICH ARE APPLICABLE THERETO: (4) THAT HE'S ERIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I  Publicant's Signature  Ide/Company  GENCY DATE In Development, DP7 Ide Highways Iking Official V. Engineering, DP	Sprinkler system: N/A  Full Partial Other Suppression # of Heads  That he/she is authorized to make this applete will perform no work on the above refersive form the work permitted and posting in the work permitted and p	Other Structure; Dimensions: Footings: Roof Height: State Certified Mod Manufactured Hom LICATION; (2)THAT THE INFORMATION IS OR RENCED PROPERTY NOT SPECIFICALLY DE OTICES.  Print Name  PERMANCE OF HOWARD CO ATLY AND LEGIBLY. **  CE USE OMEY-  DPZ SETBACK II  Front: Reer: Side: Side St.: All minimum setbacks ms:?	Spr  Juliar  J	PROPERTY ID#:  PROPERTY ID#:  PROPERTY ID#:  S  S  S  S  S  S  S  S  S  S  S  S  S
Masonry Wood Frame State Certified Modular  E UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: ( WAND COUNTY WHICH ARE APPLICABLE THERETO: (4) THAT HE'S E RICHTATO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I  Policant's Signature  The/Company  GENCY DATE THE Highways Iking Official W. Encineering DP  TO TO THE PURPOSE  TO THE PURPOSE  T	Sprinkler system: N/A   Full Partial Other Suppression # of Heads  That he/she is authorized to make this apple he will perform no work on the above refer inspecting the work permitted and posting in the work permitted and permitted a	Other Structure; Dimensions: Footings: Roof Height: State Certified Mod Manufactured Horn Rescored Property Not specifically de Otices.  Print Name  Deta FFINANCE OF HOWARD CO ATLY AND LEGIBLY.  DPZ SETBACK II Front: Resc: Side: Side St.: All minimum setbacks met? YES □ No □ Is Entrance Perm	DUNTY  NEORMATION Filing fee Permit fee Excise tax Add'l per TOTAL FE Sub-total p Balance dt	PROPERTY ID#:  PROPER
Masonry Wood Frame State Certified Modular  E UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: ( WARD COUNTY WHICH ARE APPLICABLE THERETO, (4) THAT HE/S E RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I  Publicant's Signature  CENCY DATE IN DEVElopment, CP7  The Highways Ilding Official M. Engineering, DP Seth Protection  Sedment Cortrol as provel required prior to  YES CL NC CI	Sprinkler system: N/A   Full Partial Other Suppression # of Heads  That He/she is Authorized to Make this applied will perform no work on the above refersive the will perform no work permitted and posting in the work permitted and posting in th	Other Structure; Dimensions: Footings: Roof Height: State Certified Mod Manufactured Hom LICATION; (2)THAT THE INFORMATION IS OR RENCED PROPERTY NOT SPECIFICALLY DE OTICES.  Print Name  PERMANCE OF HOWARD CO ATLY AND LEGIBLY. ** CE USE OMLY- DPZ SETBACK II Front: Rear: Side: Side St.: All minimum setbacks met? YES □ NO □	DUNTY  NFORMATION Filing fee Permit fee Excise tax Add'l per. TOTAL FE	PROPERTY ID#
Masonry Wood Frame State Certified Modular  E UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: ( WARD COUNTY WHICH ARE APPLICABLE THERETO, (4) THAT HE/S E RICHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I  Publicant's Signature  Tile/Company  GENCY DATE IN DEVElopment DPZ IN Engineering DP Stin Protection Sodiment Control as proval required prior to YES CI NC CI  CONTINGE 12 CONSTRUCTION	Sprinkler system: N/A  — Full — Partial — Other Suppression — # of Heads  1) That he/she is authorized to make this applied with the work on the above refer in specting the work permitted and posting in the work permitted and permit permitted and permitted and permitted and permitted and permitt	Other Structure; Dimensions: Footings: Roof Height: State Certified Mod Manufactured Horn Lication; (2) That The Information is or RENCED PROPERTY NOT SPECIFICALLY DE ROTICES.  Print Name  Print Name  Det FINANCE OF HOWARD CO ATLY AND LEGIBLY. ** DPZ SETBACK II Front: Reer: Side: Side St.: All minimum setbacks met? YES □ NO □ Is Entrance Perm YES □ NO □	DUNTY  NFORMATION Filing fee Permit fee Excise tax Add'l per. TOTAL FE Sub-total p R required? Balance dt Check	PROPERTY ID#
Masonry Wood Frame  State Certified Modular  Eundersigned Hereby Certifies AND AGREES AS FOLLOWS: ( WARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/S ERICHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF I  Publicant's Signature  Tile/Company  CENCY DATE IN DEVElopment, DP7 Interpretation  Protection  Sediment Control a, provel required prior to YES D. NO. D.	Sprinkler system: N/A   Full Partial Other Suppression # of Heads  1) That he/she is authorized to make this appl the will perform no work on the above refer inspecting the work permitted and posting in the work permitted and permitted an	Other Structure: Dimensions: Footings: Roof Height: State Certified Mod Manufactured Hom LICATION, (2)THAT THE INFORMATION IS CORRENCED PROPERTY NOT SPECIFICALLY DE OTICES.  Print Name  Print Name  Determine DISTRICT OF HOWARD CONTICES.  PROPERTY AND LEGIBLY. ** EUSE OMLY- DPZ SETBACK II Front: Rear: Side: Side: Side St.: All minimum setbacks met? YES II NO II Is Entrance Perm YES II NO II Historic District?	DUNTY  NFORMATION Filling fee Permit fee Excise tax Add'I per. TOTAL FE Sub-total p  It required? Balance do Check Validation	PROPERTY ID#

