

Building Permit Application

Howard County Maryland

Department of Inspections, Licenses and Permits

3430 Court House Drive

Permits: 410-313-2455 www.howardcountymd.gov

Date Received: 5-6-13

Permit No.: 6/300/736

Building Address: 15305 5	weetbay St.		Property Owner's Name:	BELLE H	AVEN BAKER LLC		
City: WOODBINE State: MD Zip Code: 21797			Address: 10751 Falls Rd. Ste. 405				
Suite/Apt. #SDP/WP/BA #:F-07-38			City:				
Census Tract: Subdivision: BELLE HAVEN			Email:				
			Applicant's Name & Mailir	og Address. (if o	ther than stated herein)		
Section:         Area:         Lot:         IC           Tax Map:         Parcel:         Grld:			Applicant's Name & Mailing Address, (if other than stated herein)  Applicant's Name: Yicky Meyer				
Zoning: Map Coo					Zip Code:		
Zoning: wap coo	dinates:Lot 502	:e:	City:Phone: 410-296-69	state: POO Fax:	24p Code:		
Existing Use: vacant 1	ot		Email: MDBLDGPE				
Proposed Use: new S.	F. D.		Contractor Company: K	HOVNAN	INAN HOMES		
Estimated Construction Cost: \$ 1	19 000	+RAD.	Contact Person: Chest	er Will	ett		
Estimated Construction Cost: \$  Description of Work:	- MAIST -	FIELL	Address: 1802 Brightseat Rd.				
3 CM SIDE LON	N 6 N 4 A G C	LICVI	City: Landover State: MD Zp Code: 20785				
ROPY MONI	IL DA EN	too	License No. : 3149 Phone301-772-8900 Fax:				
			Email: CWillett@KHOV.COM				
Occupant or Tonant: HOTA							
Was tenant space previously occu	pied?	ØNo O4 4 □	Engineer/Architect Compar	ny: D. D.	C.		
Contact Name:	3/2 BAth	KMS,	Responsible Design Prof.: _				
Address: FIRPING	O, FIN BSA	1+	Address 2 E. Main St.				
City:			City: Westminster	fate: MD	Zip Code: 21157		
Phone:	Fax:	-	Phone: 410-386-0	560 Fax:			
Email:			Email:				
					Control State of Company of Control State of Control Stat		
Commercial Building Characteris Height:	tics Residential Building Ch ✓ SF Dwelling ☐ SF To		Utilities				
No. of stories:	Depth	The second secon	Water Suppl	Υ			
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:		Private				
Area of construction (sq. ft.):	2 <sup>nd</sup> floor: Basement:		Sewage Dispo	sal			
Area or construction (sq. 1t.):	Inished Basement		☐ Public				
Use group:	☐ Unfinished Basement		Private				
Canadamatian Assaul	☐ Crawl Space			□No	$\mathcal{A}_{\mathcal{A}}}}}}}}}}$		
Construction type:  ☐ Reinforced Concrete	☐ Slab on Grade No. of Bedrooms:		Gas: Ges	□No			
☐ Structural Steel	Multi-family Dw	elling	Heating Syste	m			
☐ Masonry ☐ Wood Frame	No. of efficiency units:		☐ Electric ☐ Oil		The second second		
State Certified Modular	No. of 1 BR units: No. of 2 BR units:		☑ Natural Gas ☐ Propa ☐ Other:	ne Gas			
	No. of 3 BR units:		Sprinkler Syste	m:			
	Other Structure:		☐ Yes ☐ No				
Carl Contract to the said of the said of the said	Dimensions: Footings:						
	Roof:		Grading Pe	rmit Number:	608000100		
The second secon	☐ State Certified Modul						
	☐ Manufactured Home		Building Shell Pe	rmit Number:			
THE UNDERSIGNED HEREBY CERTIFIES AND WITH ALL REGULATIONS OF HOWARD COUTHS APPLICATION; (5) THAT HE/EHE GRANT	NTY WHICH ARE APPLICABLE THERETO	; (4) THAT HE/SHE W	ILL PERFORM NO WORK ON THE ABOV	E REFERENCED PRO	PERTY NOT SPECIFICALLY DESCRIBED IN		
Applicant's Signature	401	7-	Int Name Vicky Meyer				
• • • • • • • • • • • • • • • • • • • •	J '	Pri	5/ Ca /	2012	11 7114		
MDBLDGPERMITS@CO	CAST NET	Da	nte S	2013	C/2# /41 1		
AGENT Title/Company		-		4	\$150		
			NANCE OF HOWARD COUNTY				
	••	PLEASE WRITE NEA	TLY & LEGIBLY**				
AGENCY DATE	SIGNATURE OF APPROVAL	DPZ SETBACK	INFORMATION	Filing Fee	T\$ 187)		
State Highways	SIGNATIONS OF APPROVAL	Front:		Permit Fee	\$		
Building Officials		Rear: Side:		Tech Fee Excise Tax	\$		
PSZA (Zoning)		Side St.:		PSFS	\$		
PSZA (Engineering)		All minimum s		Guaranty Fu			
Mealth 5/29/1	H . 11. C2 1	Is Entrance Per Historic Distric	rmit Required?  Yes No	Add'l per Fe	se \$		
Is Sediment Control approval requir	ed for issuance? Yes No	The second secon	or New Town Zone:	Sub-Total P	ald \$		
				Balance Due	\$		

Distribution of Copies: White: Building Officials

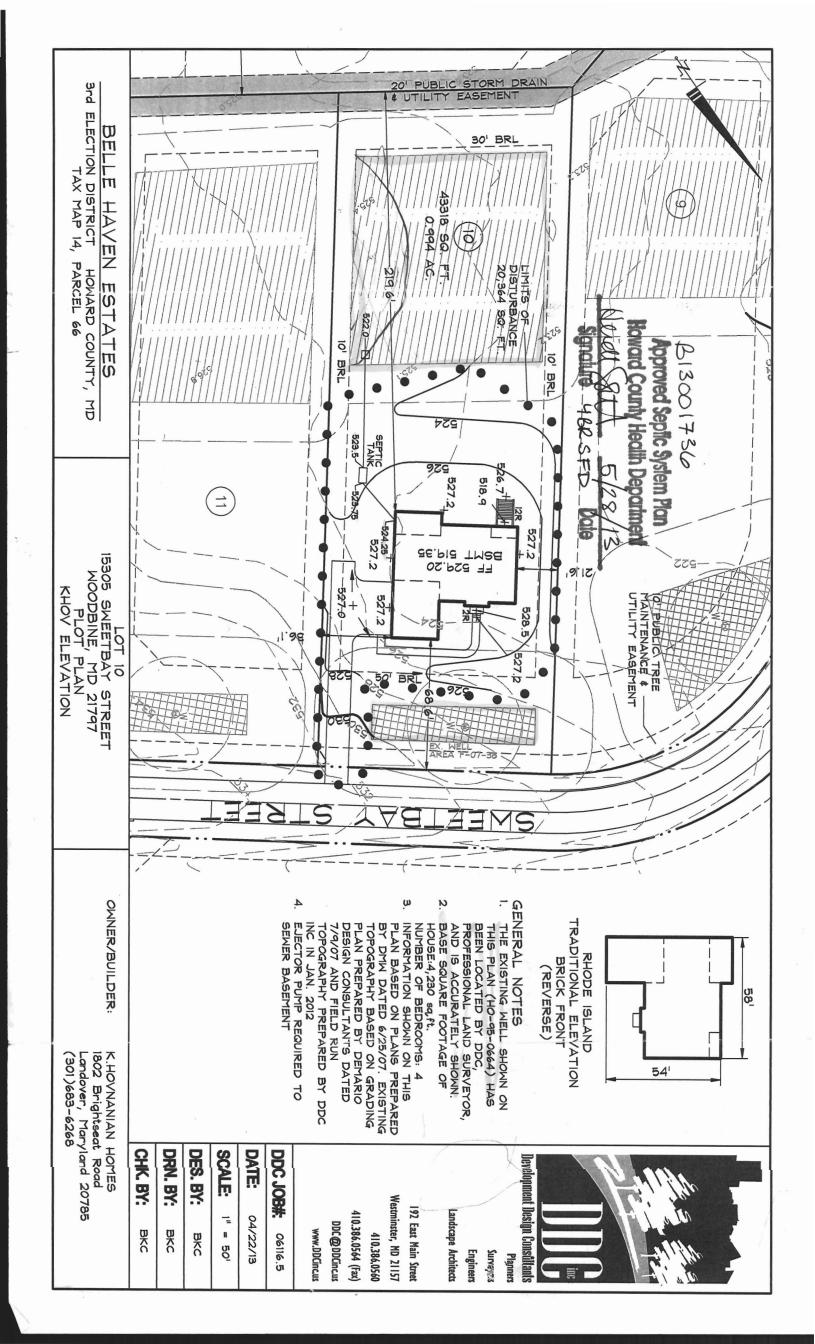
☐ CONTINGENCY CONSTRUCTION START

Green: PSZA,Zoning

Yellow: PSZA,Engineering

Pink: Health

Check





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Howard County Maryland

Department of Inspections, Licenses and Permits

3430 Court House Drive

Permits: 410-313-2455

www.howardcountymd.gov

Date Received:					
	200 E23 W. CLCC	DESIRED STATE	120/05/05/05/09	August 1	TOTAL SERVICE AND ADDRESS OF THE PARTY OF TH

Permit No.: B13000006

Building Address: 15505	A CONTRACTOR OF THE PROPERTY O		Property Owner's Name:	16 4/av	en ruler
City: WCGIOAO State	a: Zip Code: 🔃	79	Address:		
Suite/Apt. #SI	)P/WP/BA #:		Phone:	1.1.5.14 (100) (10	
Census Tract:	Subdivision:	lavia	Email:		57371
Section:Ar			Applicant's Name & Mailing	Address. (If other	than stated herein)
Tax Map: 14 Parce			Applicant's Name:		
Zoning: Map Coordin	ates:Lot Size	LAC	City:		Zip Code:
Existing Use:			Email:	Fax:	w. Drevood
Proposed Use:	DOWN WOUNT	MARSES.	Contractor Company:	Cour nai	Vona O Fras
Estimated Construction Cost: \$			Contact Person:	n teru	215
Description of Work:		THAC	Address:	15 NIGOLA	Ro There
			City:Sta	te: //// Zip	Code:
Hobar were			License No. :	Fave	Table and the same
		11-11-11-11-1	Email:	rdx.	
Occupant or Tenant:	0/				
Was tenant space previously occupie	d? □Yes	□No	Engineer/Architect Company	( osyd)(0)	Clar
Contact Name:			Responsible Design Prof.:	Alexander (1997)	
Address:			Address:		
	State:Zip Code:		City:Sta	te: 7in (	Code:
City:					
Phone:	Fax:		Phone:	Fax:	
Email:			Email:		
Commercial Building Characteristics	Residential Building Ch	aracteristics	Utilities		
Height:	☐ SF Dwelling ☐ SF Tov	ALCOHOLOGICAL CONTRACTOR AND AND AND ADDRESS OF THE PARTY	<u>Water Supply</u>		
No. of stories:	<u>Depth</u>	Width	☐ Public		14 10 10 10 10 10 10 10 10 10 10 10 10 10
Gross area, sq. ft./floor:	1 <sup>st</sup> floor: 2 <sup>nd</sup> floor:		☐ Private		A Rich Philad Trans
Area of construction (sq. ft.):	Basement:		Sewage Dispose	<u>al</u>	LONG SHEET
Area or construction (5q. 1a.).	☐ Finished Basement		☐ Public		
Use group:	☐ Unfinished Basement	The state of	Private		Managaran Labe
	☐ Crawl Space		Electric:	∃No	
Construction type:	☐ Slab on Grade	1 1 1 1 1 1 1 1		□No	190 Section Section
☐ Reinforced Concrete	No. of Bedrooms:	4 70 有以称了5			
☐ Structural Steel	Multi-family Dw	relling	Heating System	1	
Masonry	No. of efficiency units:		☐ Electric ☐ Oil		
□ Wood Frame	No. of 1 BR units:		☐ Natural Gas ☐ Propand	e Gas	
☐ State Certified Modular	No. of 2 BR units:		☐ Other:	21 4 21 12 2 2 3 3 3 3 3	
	No. of 3 BR units: Other Structure:		Sprinkler System	<u>n:</u>	
	Dimensions:	a como de englista de	☐ Yes ☐ No		
> Roadside Tree Project Permit	Footings:	A Determinant			
□Yes □No	Roof:		Grading Peri	mit Number:	
Roadside Tree Project Permit #	☐ State Certified Modul	lar			
	☐ Manufactured Home		Building Shell Peri	mit Number:	
THE UNDERSIGNED HEREBY CERTIFIES AND AG WITH ALL REGULATIONS OF HOWARD COUNT THIS APPLICATION; (5) THAT HE/SHE GRANTS C  Applicant's Signature  Email Address  Title/Company	Y WHICH ARE APPLICABLE THERETO OUNTY OFFICIALS THE RIGHT TO EN	r; (4) THAT HE/SHE V TER ONTO THIS PROI	VILL PERFORM NO WORK ON THE ABOVE	REFERENCED PROPERTY	NOT SPECIFICALLY DESCRIBED IN
		PLEASE WRITE NE			
			E USE ONLY-		
AGENCY DATE	SIGNATURE OF APPROVAL	DPZ SETBACK	INFORMATION	Filing Fee Permit Fee	\$ 1000

AGENCY		DATI	E	SIGI	NATURE OF	APPROVA
State Highways			4			
<b>Building Officials</b>			S. Carrie			
PSZA (Zoning)			4.0			
PSZA ( Engineering )			1.57			
Health	6	18/	13	A	uiii.	Mt

☐ CONTINGENCY CONSTRUCTION START

Distribution of Copies: White: Building Officials

Green: PSZA,Zoning

Rear:		
iide:	',	
Side St.:		
All minimum setbacks met?	☐ Yes	□No
s Entrance Permit Required?	☐ Yes	□No
Historic District?	☐ Yes	□No
ot Coverage for New Town Z	one:	

Filing Fee	\$ /100	U
Permit Fee	\$	
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	
<b>Guaranty Fund</b>	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub-Total Paid	\$	
Balance Due	\$	
Check	#	

Yellow: PSZA,Engineering

Pink: Health

Gold: SHA

